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SALUS POPULI SUPREMA LEX ESTO

"The welfare of the people shall be the supreme law."



ROBIN CARNAHAN
SECRETARY OF STATE

MISSOURI REGISTER

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RULES—Cite material in the *Missouri Register* by volume and page number, for example, Vol. 28, *Missouri Register*, page 27. The approved short form of citation is 28 MoReg 27.

The rules are codified in the *Code of State Regulations* in this system—

Title	Code of State Regulations	Division	Chapter	Rule
1	CSR	10-	1.	010
Department		Agency, Division	General area regulated	Specific area regulated

They are properly cited by using the full citation , i.e., 1 CSR 10-1.010.

Each department of state government is assigned a title. Each agency or division within the department is assigned a division number. The agency then groups its rules into general subject matter areas called chapters and specific areas called rules. Within a rule, the first breakdown is called a section and is designated as (1). Subsection is (A) with further breakdown into paragraph 1., subparagraph A., part (I), subpart (a), item I. and subitem a.

RSMo—The most recent version of the statute containing the section number and the date.

Rules appearing under this heading are filed under the authority granted by section 536.025, RSMo 2000. An emergency rule may be adopted by an agency if the agency finds that an immediate danger to the public health, safety or welfare, or a compelling governmental interest requires emergency action; follows procedures best calculated to assure fairness to all interested persons and parties under the circumstances; follows procedures which comply with the protections extended by the *Missouri* and the *United States Constitutions*; limits the scope of such rule to the circumstances creating an emergency and requiring emergency procedure, and at the time of or prior to the adoption of such rule files with the secretary of state the text of the rule together with the specific facts, reasons and findings which support its conclusion that there is an immediate danger to the public health, safety or welfare which can be met only through the adoption of such rule and its reasons for concluding that the procedure employed is fair to all interested persons and parties under the circumstances.

Rules filed as emergency rules may be effective not less than ten (10) days after filing or at such later date as may be specified in the rule and may be terminated at any time by the state agency by filing an order with the secretary of state fixing the date of such termination, which order shall be published by the secretary of state in the *Missouri Register* as soon as practicable.

All emergency rules must state the period during which they are in effect, and in no case can they be in effect more than one hundred eighty (180) calendar days or thirty (30) legislative days, whichever period is longer. Emergency rules are not renewable, although an agency may at any time adopt an identical rule under the normal rulemaking procedures.

Title 8—DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS Division 50—Division of Workers' Compensation Chapter 2—Procedure

EMERGENCY AMENDMENT

8 CSR 50-2.030 Resolution of Medical Fee Disputes. The division proposes to amend the Purpose, sections (1) and (2) and add new sections (5) and (6).

PURPOSE: *This amendment clarifies the procedures that are available to health care providers, employers and insurers to resolve medical fee disputes concerning charges for health care services as set forth in section 287.140, RSMo et seq. This amendment also establishes a procedure that applies if the total amount of reimbursement sought in a reasonableness dispute is one thousand dollars (\$1,000) or less. This amendment also sets forth the procedure that applies where the employer or insurer may file a request for an award on undisputed facts in regard to the application for direct payment on the sole ground that the health care services for which direct payment is being sought were not authorized by employer or insurer. This amendment also clarifies the confidentiality of the records and how the parties may request records from the division.*

PURPOSE: *This rule sets forth the Division of Workers' Compensation administrative procedures available to employers,*

insurance carriers and health care providers to resolve disputes concerning charges for health care services, in accordance with section 287.140, RSMo.

EMERGENCY STATEMENT: *This emergency amendment is necessary to clarify the procedures available to health care providers, employers and insurers to resolve the medical fee disputes after the Missouri Court of Appeals—Western District issued its opinion on May 9, 2006, in **Cox Health Systems v. Division of Workers' Compensation of Dept. of Labor and Indus. Relations**, 190 S.W.3d 623 (Mo. App. W.D. 2006). The Court of Appeals determined that "8 CSR 50-2.030(1)(O) and 8 CSR 50-2.030(2)(I) do not fairly carry out the mandate of section 287.140, but instead arbitrarily and impermissibly cut off jurisdiction when the workers' compensation case is closed." In addition, the division has deleted the ninety (90)-day waiting period that was contained in 8 CSR 50-2.030(1)(A) and 8 CSR 50-2.030(2)(A) as it impacts upon the health care provider's ability to file the medical fee dispute applications with the division and the health care providers' ability to receive notice and have an opportunity to be heard if the workers' compensation case is otherwise settled or dismissed. The emergency amendment sets forth the procedure for the health care provider to request case status information from the division on injuries that have been reported pursuant to section 287.380, RSMo or where claims for compensation have been filed pursuant to section 287.430, RSMo prior to the health care provider filing a medical fee dispute application with the division. This is necessary to comply with the division's administrative responsibility to assign a medical fee dispute number to an application that would be submitted on a workers' compensation case that is pending before the division. The amendment also establishes a procedure that applies if the total amount of the additional reimbursement sought in a reasonableness dispute is one thousand dollars (\$1,000) or less in which case either party may file a written request for an administrative ruling. Any party aggrieved by the director's administrative ruling can file a request for an evidentiary hearing before the administrative law judge within twenty (20) days of the date of the administrative ruling. The amendment also sets forth the procedure that applies where the employer or insurer may file a request for an award on undisputed facts in regard to the application for direct payment on the sole ground that the health care services for which direct payment is being sought were not authorized by employer or insurer. The division believes that these procedures will streamline the process without impacting upon the parties' ability to request an evidentiary hearing before the administrative law judge. The division believes that these procedures are in furtherance of the Cox case as they conform to the division's statutory obligations under Chapter 287, RSMo, enhance the parties opportunity to obtain a speedy resolution of disputes that are less than one thousand dollars (\$1,000) without depriving the parties of a right to an evidentiary hearing. The opinion in the Cox case has dramatically increased the medical fee dispute caseload and the procedures are necessary to assist all parties, the division and the administrative law judges. There are approximately five thousand one hundred eighty-seven (5,187) open medical fee disputes of which approximately one thousand eight hundred and sixty-eight (1,868) are reasonableness cases where the disputes are under one thousand dollars (\$1,000). By implementing the procedures the division is complying with the dictates of the Cox case to process the applications regardless of whether the statute of limitations has run, or the case has been settled or dismissed or administratively closed. The amendment also clarifies the confidentiality of the records and how the parties may request records from the division. The administrative ruling procedure requires the parties to submit supporting documentation such as a copy of the contract or agreement between the health care provider and employer or insurer, and medical records, etc. that the filing party may claim as closed or confidential as explained in the amendment. In Fiscal Year 2006, the*

division received approximately twelve thousand one hundred ninety-four (12,194) inquiries from health care providers on status of workers' compensation cases that were either pending or settled or dismissed or where reports of injury were filed or not filed with the division. In light of the Cox case where the division is now required to accept all applications, the method to request records and information from the division and the confidentiality of the records needs to be clarified for all interested parties.

This emergency amendment is necessary to protect the public health, safety and welfare of all interested parties. The division believes this emergency amendment to be fair to all interested parties as it provides guidance on how to file an application on both a "reasonableness dispute" or "direct pay dispute," and offers the parties an option to pursue an administrative ruling by the division director if the total amount of additional reimbursement sought by the health care provider is one thousand dollars (\$1,000) or less. The division finds an immediate danger to the public health, safety and/or welfare and a compelling governmental interest, which requires this emergency action. This emergency amendment limits its scope to the circumstances creating the emergency and complies with the protections extended by the Missouri and United States Constitutions. A proposed amendment, which covers the same material, is published in this issue of the *Missouri Register*. This emergency amendment is filed August 15, 2006 and will be effective September 1, 2006 and expires on February 27, 2007.

(1) Procedures [p]/Pertaining to [a]/Applications for [p]/Payment of [a]/Additional [r]/Reimbursements (Reasonableness Disputes).

(A) If an employer or insurer disputes the reasonableness of a medical fee or charge, the employer or insurer shall notify the health care provider in writing that the medical charge is being disputed and shall explain the basis for the dispute. The employer or insurer may tender partial payment and the health care provider may accept payment of the amount tendered without prejudice to the filing of an application for payment of additional reimbursements of medical fees. Upon receiving the written notice of the dispute, the health care provider *[shall] may* contact the insurer or employer to attempt to resolve the dispute. *[If the negotiation is unsuccessful and more than ninety (90) days have elapsed since the date of first billing, the health care provider may file an application for payment of additional reimbursement of medical fees with the division.]*

(B) In order to initiate a reasonableness dispute case, the health care provider must submit a Request for Case Status Information on a division-approved form to the division prior to the filing of an application for payment of additional reimbursement of medical fees. The health care provider shall file with the division an original application for payment of additional reimbursements of medical fees. The application shall contain the following information:

1. The name, address and telephone number of the health care provider *[and, if different, the address where the service was rendered];*
2. Name, address and telephone number of the employer and insurer against whom the application is being filed;
3. Name, address and Social Security number of the employee for whom health care services were rendered, together with the date of injury and date the services were provided, for all disputes;
4. The amount in dispute;
5. Any information the division deems necessary to resolve the dispute.

(C) The health care provider shall serve through personal service or by certified mail, return receipt requested, a copy of the application on the person or corporation against whom the application has been filed. The health care provider shall file proof of service with the division. **The division shall send by first-class mail a copy of the application to the employee, employer, insurer or third-party administrator or their attorneys of record as the case may be.**

(G) After the filing of an application for payment of additional reimbursement of medical fees, the parties *[shall again] may* attempt to resolve their dispute without the assistance of the division.

(H) If the total amount of the additional reimbursement sought is one thousand dollars (\$1,000) or less, and the parties are unable to resolve their dispute *[after sixty (60) days have lapsed since the filing of the application for payment of additional reimbursement of medical fees]*, either party may file a written request for administrative ruling which request initiates the administrative ruling procedure. All parties shall participate in the administrative ruling procedure.

1. Within ten (10) days of the receipt of the request for administrative ruling, the division director shall assign the matter to the dispute management unit for an informal summary review. The dispute management unit may require the health care provider to provide information in support of its application for payment of additional reimbursement of medical fees, such information to include, but is by no means limited to, the following:

A. Complete certified copies of itemized billing statements;

B. Complete certified copies of medical records corresponding to the itemized billing statements;

C. Affidavit from the health care provider or from health care provider's counsel stating the basis for health care provider's belief that all the medical charges are fair and reasonable and otherwise in compliance with Chapter 287, RSMo;

D. Copy of any contracts or agreements between health care provider and employer or insurer.

2. The dispute management unit may require the employer and/or insurer to provide information in defense of the application for payment of additional reimbursement of medical fees, such information to include, but is by no means limited to, an affidavit from the employer or insurer, or counsel, stating the basis for employer/insurer's belief that the medical charges are not fair or reasonable, or otherwise not in compliance with Chapter 287, RSMo.

3. No discovery shall be allowed.

4. Within ten (10) days of completion of its informal summary review, the dispute management unit shall make a recommendation to the division director. Within ten (10) days of the receipt of the dispute management unit's recommendation, the division director shall issue an administrative ruling in the case awarding additional reimbursement to the health care provider in an amount certain or denying additional reimbursement in full.

5. The division shall, immediately upon issuance of the administrative ruling, send a copy thereof by first-class mail to counsel for all parties and to any party not represented by counsel. In the event any party is aggrieved by the director's administrative ruling, that party must file with the division's Jefferson City office a request for evidentiary hearing within twenty (20) days of the date of the administrative ruling, using the division-approved form. In the event no request for evidentiary hearing is filed within twenty (20) days of the date of the administrative ruling, the administrative ruling shall become the final and conclusive determination in the case.

6. Upon timely filing of the request for evidentiary hearing, the division shall assign the case to the local adjudication office of proper venue for evidentiary hearing. The requesting party may withdraw its request for evidentiary hearing, with prejudice, at any time after the filing of the request and prior to the conclusion of the evidentiary hearing. The withdrawal of the request for evidentiary hearing must be in writing and must be signed by the party or counsel. The request for evidentiary hearing may not be withdrawn without prejudice. Upon withdrawal of the request for evidentiary hearing, the administrative ruling shall become the final and conclusive determination in the case.

7. The evidentiary hearing shall be a simple informal proceeding, and shall be held by an administrative law judge at a place and time to be set by the division. The rules of evidence in civil cases shall apply, except that the administrative law judge

may consider the information already obtained from the parties by the dispute management unit. A record shall be made of the evidentiary hearing in the same manner as all other evidentiary hearings, as set forth in section 287.460.1, RSMo. No discovery shall be allowed unless specifically ordered in writing by the administrative law judge assigned to the case, and only upon the showing of extraordinary circumstances.

8. Within thirty (30) days of the last day of the hearing, the administrative law judge shall issue an award either awarding additional reimbursement to the health care provider in an amount certain or denying additional reimbursement in full. Either party may file an application for review with the Labor and Industrial Relations Commission within twenty (20) days from the date of the award of the administrative law judge. This review shall be subject to review and appeal in the same manner as provided for other awards in Chapter 287, RSMo.

9. If the employer or insurer fails to comply with the director's administrative ruling, the health care provider may file a complaint with the division's fraud and noncompliance unit pursuant to section 287.128, RSMo.

(I) If the total amount of the additional reimbursement sought is more than one thousand dollars (\$1,000), and the parties are unable to resolve their dispute, the health care provider may file a written application for an evidentiary hearing of the medical fee dispute. The health care provider shall forward a copy of the application for an evidentiary hearing to all parties. The employer or insurer shall file an answer **on a division-approved form** to the application for an evidentiary hearing within thirty (30) days from the date of the application, unless good cause is found by the division to extend the filing of the answer. If the employer or insurer fails to file a timely answer the facts contained in the application are deemed admitted as true, **but conclusions of law are not deemed admitted**. An evidentiary hearing shall be scheduled in front of an administrative law judge *[or legal advisor]*. An application for an evidentiary hearing cannot be dismissed without prejudice after an evidentiary hearing has been scheduled, without approval of the administrative law judge *[or legal advisor]*.

[(I)] (J) *[Either party]* Parties may engage in discovery to the extent authorized by Chapter 287, RSMo.

[(J)] (K) The evidentiary hearing shall be held at a place and time to be set by the division. The division shall notify all parties as to the time and place of the hearing. The hearing shall be simple and informal and all parties shall be entitled to be heard and to introduce evidence, however, the rules of evidence in civil proceedings shall apply. The administrative law judge *[or legal advisor]* shall conduct the hearing and shall issue an award deciding the issues in dispute. The award should be completed within thirty (30) days of *[submission of the case]* **the last day of the hearing**.

[(K)] (L) Either party may file an application for review with the Labor and Industrial Relations Commission within twenty (20) days from the date of the award of the administrative law judge *[or legal advisor]*. This review shall be subject to review and appeal in the same manner as provided for other awards in Chapter 287, RSMo.

[(L)] (M) The parties shall notify the division **in writing** of the date and amount of any settlement of the application for payment of additional reimbursement of medical fees.

[(M)] (N) The division, without a hearing, may reject an application for payment of additional reimbursements of medical fees without prejudice for failure to follow the procedures of this rule.

[(N)] (O) Any settlement of a **reasonableness dispute** or award entered on the application for reimbursement of additional medical fees shall prohibit the health care provider from pursuing any additional fees for work-related medical treatment from the employee **for the health care services that were the subject of the application**.

[(O)] If the health care provider filed an application for payment of additional reimbursement of medical fees prior to the underlying workers' compensation case is dismissed or settlement is approved by the administrative law judge or legal advisor, or an award entered by the administrative law judge, or within the applicable period of limitations, the divi-

sion retains jurisdiction to hear the dispute. If the parties file an application for payment of additional reimbursement of medical fees after the underlying workers' compensation case is dismissed or settlement is approved by the administrative law judge or legal advisor, or an award is entered by the administrative law judge, or the applicable period of limitations has expired, the division does not have jurisdiction to accept the application. The division shall notify the parties regarding its lack of jurisdiction to hear the dispute.]

(2) Procedures Pertaining to Applications for Direct Payments (Direct Pay Disputes).

(A) If an employer or insurer fails to make payment for **authorized** services provided to an employee by a health care provider due to *[an]* a **work-related injury that** is covered under the Missouri Workers' Compensation Law, *[and more than ninety (90) days have elapsed since the date of first billing,]* the health care provider may file an application for direct payment with the division.

(B) The *[notice of services provided and request]* application for direct payment shall contain the following information:

1. The name, address and telephone number of the health care provider and, if different, the address where the service was rendered;

2. Name, address and telephone number of the employer and insurer against whom the application is being filed;

3. Name, address and Social Security number of the employee for whom health care services were rendered, together with the date of injury, for all disputes;

4. A brief description of the disputed services rendered; the date services were provided; the amount of money claimed to be owed; and the name and title of the person from the insurer or employer giving authorization *[(if known)]*;

5. Any information the division deems necessary.

(C) The health care provider shall serve the employer or insurer through personal service or by certified mail, return receipt requested, a copy of the application on the person or corporation against whom the application has been filed. The health care provider shall file proof of service in accordance with section (4) of this rule with the division. **The division shall send by first-class mail a copy of the application to the employee, employer, insurer or third-party administrator or their attorneys of record as the case may be.**

(D) The application shall be filed on a form prescribed by the division and shall contain the required information. If the application does not include all the information required by *[paragraph]* **subsection (B)(1.)** of this *[rule]* **section** or proof of service is not filed with the division, the application will be returned for the additional information.

(E) The division, without a hearing, may reject an application for direct payment without prejudice if the application does not pertain to a dispute relating to services **that were authorized in advance by the employer or insurer** for a compensable injury or for failure to follow the procedures of this rule.

(F) If there is no report of injury or claim for compensation filed with the division for the **work-related** injury for which the health care *[was]* **services were** provided, the application will be returned for lack of jurisdiction of the division.

(H) The health care provider is barred from pursuing the employee for any work-related costs incurred in pursuing the medical fee dispute and any reduction in payment of a medical charge. This rule is not intended to prohibit the provider from pursuing the responsible party for payment of fees for medical treatment that is found by award or settlement not to be *[work-related]* **compensable**.

(I) *[The division shall lose jurisdiction to hear medical fee disputes relating to direct payments after the underlying workers' compensation case is dismissed or settlement approved by the administrative law judge or legal advisor or an award is entered by the administrative law judge.]* **Requesting and Issuing Awards on Undisputed Facts.**

1. An application for direct payment may be denied in full by an administrative law judge without an evidentiary hearing by

issuing an award on undisputed facts in accordance with the following procedures. The employer or insurer may file a request for an award on undisputed facts in regard to the application for direct payment on the sole ground that the health care services for which direct payment is being sought were not authorized by employer or insurer. The request for an award on undisputed facts shall be filed on the approved division form. The request for an award on undisputed facts shall state with particularity each material fact as to which the employer or insurer claims there is no genuine issue, with specific references to the contents of the application for direct payment, deposition testimony, affidavits and documents that demonstrate the lack of a genuine issue as to such facts. Each request for an award on undisputed facts shall have attached thereto the affidavits, portions of deposition transcripts, and other documents relied upon in the request.

2. Within thirty (30) days after a request for an award on undisputed facts is filed with the division, the health care provider shall file its response on the approved division form. The response shall admit or deny each of the factual statements contained in the request. A denial may not rest upon mere allegations or general denials. Rather, the response shall support each denial with specific references to the depositions, documents or affidavits that demonstrate specific facts showing that there is a genuine issue to be decided at an evidentiary hearing. Attached to the response shall be a copy of the affidavits, deposition transcripts (or portions thereof), and other documents upon which the response relies. The response may also set forth, in detail, additional material facts that remain in dispute.

3. Upon timely filing of the response, the administrative law judge assigned to the case shall proceed to ruling on the request for an award on undisputed facts. If no response is filed within the thirty (30) days allotted (unless extended by written order of an administrative law judge), the facts as set forth in the request for an award on undisputed facts shall be deemed as true, and the administrative law judge assigned to the case shall proceed to ruling on the request for an award on undisputed facts. If the request for an award on undisputed facts and response show that there is no genuine issue as to any material fact and that the application for direct payment should be denied in full, the administrative law judge shall enter an award on undisputed facts denying the application for direct payment in full. Such award shall be a final reviewable award in the case as to the application for direct payment.

4. The health care provider may file an application for review with the Labor and Industrial Relations Commission within twenty (20) days from the date of the award of the administrative law judge. This review shall be subject to review and appeal in the same manner as provided for other awards in Chapter 287, RSMo.

5. If the request for an award on undisputed facts and response show that there is a genuine issue as to any material fact, the administrative law judge shall issue an order denying the request for an award on undisputed facts. An order denying the request for an award on undisputed facts is not a final award as to any issue, and is not subject to review or appeal.

(5) Requesting Records, Confidentiality and Storage.

(A) The Report of Injury and subsequent medical reports are considered closed records pursuant to section 287.380.3, RSMo. Section 610.021(14), RSMo authorizes the division to close the records which are protected from disclosure by law.

(B) If a person submits records to the division and wishes to claim that the record is closed or confidential, the division will maintain the record as closed, except that information that is closed pursuant to section 287.380.3, RSMo will be provided to a requesting person who is party to the workers' compensation case or an attorney who has filed an entry of appearance representing a party to the workers' compensation case or to a party in a reasonableness case. In order to claim the record as closed or confidential, the person submitting the record must state in bold or other clearly distinguishable type on the face of the record or in

the face of the cover letter accompanying the record, that the record is closed or confidential and the reason the record is asserted to be closed or confidential.

(C) The requesting person may obtain records from the division by submitting a request in writing to the division's Jefferson City office at PO Box 58, Jefferson City, MO 65102. The requesting person must state their relationship to the case as set forth in 8 CSR 50-2.020(4)(C). Records as legally required will be provided in response to a subpoena duces tecum or Release of Information form duly signed by the person giving the division authorization to release the records.

(D) The division will charge for copies of documents and certification of documents according to section 287.660, RSMo, or Chapter 610, RSMo, if applicable.

(E) The division reserves the right to store the documentation submitted in a medical fee dispute proceeding either electronically or in a paper file.

(6) The division-approved forms as referenced in these rules may be obtained from the website address <http://www.dolir.mo.gov/wc/forms/forms.htm> or by contacting the division at (573) 522-2546 or by submitting a written request to the division's Jefferson City office at PO Box 58, Jefferson City, MO 65102.

AUTHORITY: sections 287.140.4, RSMo Supp. 2005 and 287.650, RSMo [Supp. 1999] 2000. Emergency rule filed Feb. 3, 1993, effective Feb. 19, 1993, expired June 18, 1993. Emergency rule filed June 29, 1993, effective July 9, 1993, expired Nov. 5, 1993. Emergency rule filed Nov. 16, 1993, effective Nov. 26, 1993, expired March 25, 1994. Emergency rule filed June 28, 1994, effective July 8, 1994, expired Nov. 4, 1994. Emergency rule filed Oct. 20, 1994, effective Nov. 5, 1994, expired March 4, 1995. Emergency rule filed Aug. 18, 1995, effective Aug. 28, 1995, expired Feb. 23, 1996. Original rule filed Aug. 18, 1995, effective Feb. 24, 1996. Rescinded and readopted: Filed Jan. 21, 2000, effective Sept. 30, 2000. Emergency amendment filed Aug. 15, 2006, effective Sept. 1, 2006, expires Feb. 27, 2007. A proposed amendment covering this same material is published in this issue of the Missouri Register.

Title 11—DEPARTMENT OF PUBLIC SAFETY Division 10—Adjutant General Chapter 5—Missouri Veterans' Recognition Program

EMERGENCY AMENDMENT

11 CSR 10-5.010 Missouri Veterans' Recognition Program. The Adjutant General is amending the Purpose, sections (1), (2), (3), (4), (6), (7), (8) and (10).

PURPOSE: This amendment expands the recognition program to include the Vietnam War veterans who were honorably discharged and reside as a legal resident of the state or was a legal resident of the state of Missouri at the time he or she entered or was discharged from military service or at the time of his or her death.

PURPOSE: This rule prescribes guidelines as required by sections 42.175, 42.200, and 42.222, RSMo, to administer the World War II Veterans' Recognition, [and the] Missouri World War II "D-Day" Invasion of Europe, Korean Conflict and Vietnam War Medal Program. These guidelines provide a framework for World War II, Korean Conflict and Vietnam War veterans to apply for medal, medallion, and certificates in recognition of their service to Missouri and our nation during the World War II, Korean and Vietnam Wars.

EMERGENCY STATEMENT: Vietnam War veterans, who were honorably discharged and reside as a legal resident of Missouri or were a legal resident of Missouri at the time he or she entered or was discharged from military service or at the time of his or her death, are authorized to make application to the Veterans Recognition Program

for the Vietnam War medallion, medal and certificate of appreciation. This emergency amendment informs Missouri Vietnam War veterans and their spouses that they may apply for recognition awards and defines award eligibility criteria. The emergency amendment is necessary because of the compelling governmental interest to honor Missouri's estimated two hundred thirty thousand (230,000) Vietnam War veterans for their honorable and patriotic service to our state and nation. This law leaves little time to notify Missouri's veterans of their award eligibility due to the January 1, 2007 start up date and implementing an emergency amendment for the program will ensure that Missouri's compelling need to recognize these veterans for their service to preserve social freedoms will be achieved in a timely and comprehensive manner. A proposed amendment, which covers this topic, is published in this issue of the *Missouri Register*. The scope of this emergency amendment complies with the protections extended in the *Missouri and United States Constitutions*. The Division of Public Safety—Office of the Adjutant General believes this emergency amendment is fair to all interested persons and parties under the circumstances. This emergency amendment was filed August 7, 2006, effective September 7, 2006, expires February 24, 2007.

(1) Definitions as used in this rule, unless the context clearly indicates otherwise, the following terms shall mean:

(A) Adjutant General—As defined in Chapter 41, *Revised Statutes of Missouri*, section [41.110] **41.160** and all amendments thereto;

(B) Appropriate service records—Military records documenting the honorable service of a veteran in the armed forces of the United States eligibility for awards authorized under the Missouri World War II, **Korean Conflict and Vietnam War** Recognition Program. A Department of Defense DD-214 or other document acceptable to the Adjutant General;

(I) Eligible World War II veteran—Any person defined as a veteran by the United States Department of Veterans Affairs, who honorably served on active duty in the United States military service at anytime beginning December 7, 1941 and ending December 31, 1946 provided [1]—

1. [t/That such veteran [was] is a legal resident of the state of Missouri or was a legal resident of this state at the time he or she entered or was discharged from military service or at the time of his or her death; and [2]/

2. [s/Such veteran was honorably separated or discharged from military service or is still in active service in honorable status, or was legal resident of this state at the time of his or her death;

(J) Eligible Korean Conflict Veteran—Any person defined as a veteran by the United States Department of Veterans Affairs, who honorably served on active duty in the United States military service at anytime beginning June 27, 1950 and ending January 31, 1955 provided—

1. That such veteran [was] is a legal resident of the state of Missouri or was a legal resident of this state at the time he or she entered or was discharged from military service or at the time of his or her death; and

2. Such veteran was honorably separated or discharged from military service or is still in active service in honorable status, or was a legal resident of this state at the time of his or her death;

(K) Eligible Vietnam War Veteran—Any person defined as a veteran by the United States Department of Veterans Affairs, who honorably served on active duty in the United States military service at anytime beginning February 28, 1961 and ending May 7, 1975 provided—

1. That such veteran is a legal resident of the state or was a legal resident of the state of Missouri at the time he or she entered or was discharged from military service or at the time of his or her death; and

2. Such veteran was honorably separated or discharged from military service or is still in active service in honorable status, or was in active service in honorable status at the time of his or her death;

[(K)] (L) Honorably separated—The release from military service or duty under honorable conditions;

[(L)] (M) Honorable status—Attesting to creditable conduct while serving on active duty in the military;

[(M)] (N) Intestate survivor—The survivor of a [World War II] veteran who has died without a will;

[(N)] (O) Eldest living survivor—the eldest survivor of a veteran connected by blood or affinity;

[(O)] (P) Jubilee of Liberty Medal—A medal created by the Regional Council of Normandy, France, in 1994 to commemorate the 50th anniversary of the June 6, 1944, “D-Day” invasion of Europe;

[(P)] (Q) Korean Conflict—The United States led United Nations forces to defend South Korea from North Korean invaders aided by China and the former Soviet Union, beginning June 27, 1950 and ending January 31, 1955;

[(Q)] **Korean Conflict Veterans’ Recognition Award Fund—As defined in section 42.206, RSMo, consisting of all gifts, donations and bequests to the fund to be administered by the Adjutant General;**

(R) **Vietnam War—The war beginning February 28, 1961 and ending May 7, 1975;**

[(R)] (S) Legal resident—A person (veteran) whose official United States mailing address is within the boundaries of the state of Missouri;

[(S)] (T) Medal—A small object usually metal in nature bearing an emblem or picture that is issued to commemorate a person’s participation in an event or is awarded for excellence or achievement;

[(T)] (U) Medallion—An object or coin, usually round or oval in shape, resembling a medal;

[(U)] (V) Replica—A close reproduction or facsimile of the original;

[(V)] (W) Spouse—Married person, i.e.: husband, wife;

[(W)] (X) Veteran—Any person defined as a veteran by the United States Department of Veterans’ Affairs or its successor agency;

[(X)] (Y) Veterans Commission—The commission created by section 42.007, RSMo;

[(Y)] (Z) World War II—The World War beginning December 7, 1941, and ending December 31, 1946;

[(Z)] (AA) **World War II, Korean Conflict and Vietnam War Veterans’ Recognition Award Funds—As defined in sections 42.195, 42.206 and 42.226, RSMo, consisting of gifts, bequests, and donations to be administered by the Adjutant General.**

(2) The Adjutant General is responsible for the administration of the Missouri World War II Veterans’ Recognition and the World War II “D-Day” Invasion of Europe, **Korean Conflict and Vietnam War** Medal Programs and, subject to an appropriation for this purpose, will distribute a medal, medallion, and certificate to each qualified Missouri [World War II] veteran.

(3) Design.

(A) The Veterans Commission is responsible for the design of the form of the medallions, medals, and certificates and will provide the approved designs to the Adjutant General for distribution.

(4) To be eligible for the World War II, [or] Korean Conflict or **Vietnam War** Veterans’ Recognition Awards, the veteran must:

(A) Have served on active duty in the United States military service at anytime beginning December 7, 1941, and ending December 31, 1946 for the World War II award; [and] June 27, 1950, and ending January 31, 1955 for the Korean Conflict award; **and February 28, 1961, and ending May 7, 1975 for the Vietnam War;**

(B) Be a legal resident of Missouri or was a legal resident of this state at the time he or she entered or was discharged from military service or **was in active service in honorable status** at the time of his or her death;

(6) World War II, “D-Day” Invasion of Europe, [and] Korean Conflict, **and Vietnam War** veterans, to obtain authorized medals,

medallions, and certificates, must complete an application form and provide copies of appropriate military service record verification forms to the Office of the Adjutant General, Attention: Director, Missouri Veterans' Recognition Program, [2303/ 2302 Militia Drive, Jefferson City, MO 65101-1203. World War II and Jubilee of Liberty award applications must be submitted anytime after January 1, 2001. Korean Conflict Award applications must be submitted anytime after January 1, 2004. **Vietnam War Award applications must be submitted anytime after January 1, 2007.** Applications and service forms will not be returned and will become property of the state of Missouri.

(7) Application forms may be obtained by contacting the Office of the Adjutant General or contacting local Missouri Veterans Commission offices. Forms will also be provided to Missouri veterans' organizations upon request to the Director, Veterans' [World War II] Recognition Program.

(8) If any person dies after applying for a medallion, medal and a certificate [pursuant to sections 42.170 to 42.206, RSMo,] and such person would have been entitled to the medallion, medal, and the certificate, the Adjutant General shall award the medallion, medal, and the certificate in the following order:

(10) Eligibility Determination.

(A) If the Adjutant General disallows any veteran's claim to a medallion, medal, and a certificate [pursuant to sections 42.170 to 42.190, RSMo, for World War II and/or the "D-Day" Invasion of Europe recognition programs], a statement of the reason for the disallowance shall be filed with the application and a notice of ineligibility will be mailed to the applicant at the applicant's last known address.

(B) The notice of ineligibility will include information on the appeal process for applicants whose requests for [World War II Recognition Programs] awards are denied. Denied applicants will have thirty (30) days from receipt of notices of ineligibility to submit written appeals.

AUTHORITY: section 42.175, RSMo Supp. [2004] 2005. Original rule filed Sept. 14, 2000, effective March 30, 2001. Emergency amendment filed July 22, 2002, effective Aug. 1, 2002, expired Feb. 27, 2003. Amended: Filed July 22, 2002, effective Jan. 30, 2003. Emergency amendment filed July 25, 2003, effective Aug. 21, 2003, expired Feb. 17, 2004. Amended: Filed July 25, 2003, effective Feb. 29, 2004. Emergency amendment filed July 19, 2005, effective July 29, 2005, expired Jan. 24, 2006. Amended: Filed July 19, 2005, effective Jan. 30, 2006. Emergency amendment filed Aug. 7, 2006, effective Sept. 7, 2006, expires Feb. 24, 2007. A proposed amendment covering this same material is published in this issue of the *Missouri Register*.

**Title 19—DEPARTMENT OF HEALTH AND
SENIOR SERVICES
Division 60—Missouri Health Facilities Review
Committee
Chapter 50—Certificate of Need Program**

EMERGENCY AMENDMENT

19 CSR 60-50.300 Definitions for the Certificate of Need Process. This amendment modifies the address in section (18).

PURPOSE: This rule is amended because the Certificate of Need (CON) Program office was moved to a new physical location.

EMERGENCY STATEMENT: This emergency amendment is necessary to fulfill a compelling governmental interest which requires rewriting the Certificate of Need (CON) rules in order to replace the

previous office mail information with the new contact information and to preserve a compelling governmental interest in health care cost containment. The U.S. mail forwarding service has expired since the October 25, 2005, CON Program office move, and time-critical mail is being returned to CON applicants, attorneys and others. This can result in missed deadlines and substantial delays in conducting business with the public. The CON statutes, sections 197.300 to 197.366, RSMo, were enacted to ensure the preservation of health care access, the prevention of unnecessary duplication, the containment of health care costs, and the reasonable distribution of health services in Missouri.

Therefore, the Missouri Health Facilities Review Committee (committee) files this emergency amendment because it is also necessary to preserve the public health, safety and welfare of Missouri citizens by ensuring that sufficient quantity and quality care continue to be provided to CON applicants and the public. The committee believes this emergency amendment to be fair to all interested parties under these circumstances so that the committee may continue to give clear guidance to health care facilities, physicians, investors, and other prospective applicants for their planning purposes. Failure to immediately update the CON rules to provide reasonable and accurate contact information for these applications would negatively impact the state's ability to forecast need, create a confusing regulatory environment for health care providers, and impair committee's ability to meet needs. The committee wishes to reduce unnecessary applicant expense and time in the preparation of CON applications, and to accurately meet the health care needs of Missouri without unnecessarily increasing health care costs.

This emergency amendment limits its scope to the circumstances creating the emergency and complies with the protections extended by the *Missouri* and *United States Constitutions*. The committee finds that an emergency amendment is necessary to preserve health care access, allow health care providers to more easily contact the CON office, and prevent negative impacts to the public health, safety, and welfare of the citizens of Missouri. This emergency amendment was filed August 14, 2006, to become effective August 28, 2006, and will expire on February 23, 2007.

(18) The most current version of Form MO 580-1863 may be obtained by mailing a written request to the Certificate of Need Program (CONP), [915G Leslie Boulevard] PO Box 570, Jefferson City, MO 65101/12, or in person at the CONP Office, or, if technically feasible, by downloading a copy of the form from the CONP website at www.dhss.mo.gov/con.

AUTHORITY: section 197.320, RSMo 2000. Original rule filed June 2, 1994, effective Nov. 30, 1994. For intervening history, please consult the *Code of State Regulations*. Emergency amendment filed Aug. 14, 2006, effective Aug. 28, 2006, expires Feb. 23, 2007. A proposed amendment covering this same material is published in this issue of the *Missouri Register*.

**Title 19—DEPARTMENT OF HEALTH AND
SENIOR SERVICES
Division 60—Missouri Health Facilities Review
Committee
Chapter 50—Certificate of Need Program**

EMERGENCY AMENDMENT

19 CSR 60-50.400 Letter of Intent Process. This amendment modifies the agency name, report title, address, and website in sections (3), (5) and (7).

PURPOSE: This rule is amended because the Certificate of Need Program office was moved to a new physical location, changed its website address, and responded to a reorganization of the Department of Health and Senior Services.

EMERGENCY STATEMENT: *This emergency amendment is necessary to fulfill a compelling governmental interest which requires rewriting the Certificate of Need (CON) rules in order to replace the previous office mail information with the new contact information and to preserve a compelling governmental interest in health care cost containment. The U.S. mail forwarding service has expired since the October 25, 2005, CON Program office move, and time-critical mail is being returned to CON applicants, attorneys and others. This can result in missed deadlines and substantial delays in conducting business with the public. The CON statutes, sections 197.300 to 197.366, RSMo, were enacted to ensure the preservation of health care access, the prevention of unnecessary duplication, the containment of health care costs, and the reasonable distribution of health services in Missouri.*

Therefore, the Missouri Health Facilities Review Committee (committee) files this emergency amendment because it is also necessary to preserve the public health, safety and welfare of Missouri citizens by ensuring that sufficient quantity and quality care continue to be provided to CON applicants and the public. The committee believes this emergency amendment to be fair to all interested parties under these circumstances so that the committee may continue to give clear guidance to health care facilities, physicians, investors, and other prospective applicants for their planning purposes. Failure to immediately update the CON rules to provide reasonable and accurate contact information for these applications would negatively impact the state's ability to forecast need, create a confusing regulatory environment for health care providers, and impair committee's ability to meet needs. The committee wishes to reduce unnecessary applicant expense and time in the preparation of CON applications, and to accurately meet the health care needs of Missouri without unnecessarily increasing health care costs.

This emergency amendment limits its scope to the circumstances creating the emergency and complies with the protections extended by the Missouri and United States Constitutions. The committee finds that an emergency amendment is necessary to preserve health care access, allow health care providers to more easily contact the CON office, and prevent negative impacts to the public health, safety, and welfare of the citizens of Missouri. This emergency amendment was filed August 14, 2006, to become effective August 28, 2006, and will expire on February 23, 2007.

(3) A LTC bed expansion or replacement as sought pursuant to section 197.318.8 through 197.318.10, RSMo, requires a CON application, if the capital expenditure for such bed expansion or replacement exceeds six hundred thousand dollars (\$600,000), but allows for shortened information requirements and review time frames. When a LOI for a LTC bed expansion, except replacement(s), is filed, the Certificate of Need Program (CONP) staff shall immediately request certification for that facility of average licensed bed occupancy and final Class 1 patient care deficiencies for the most recent six (6) consecutive calendar quarters by the Division of [Senior Services and] Regulation [(DSSR)] and Licensure (DRL), Department of Health and Senior Services, through a LTC Facility Expansion Certification (Form MO 580-2351) to verify compliance with occupancy and deficiency requirements pursuant to section 197.318.8, RSMo. Occupancy data shall be taken from the [DSSR's] DRL's most recently published Six-Quarter Occupancy of Intermediate Care and Skilled Nursing Facility (or Residential Care and Assisted Living Facility) Licensed Beds reports. For LTC bed expansions or replacements, the sellers and purchasers shall be defined as the owner(s) and operator(s) of the respective facilities, which includes building, land, and license. On the Purchase Agreement (Form MO 580-2352), both the owner(s) and operator(s) of the purchasing and selling facilities should sign.

(5) For a LTC bed expansion proposal pursuant to section 197.318.8(1)(e), RSMo, the CONP Staff shall request occupancy

verification by the [DSSR] DRL who shall also provide a copy to the applicant.

(7) The most current version of Forms MO 580-2351, MO 580-2352, and MO 580-1871 may be obtained by mailing a written request to the CONP, [915G Leslie Boulevard] PO Box 570, Jefferson City, MO 65101/2, or in person at the CONP Office, or, if technically feasible, by downloading a copy of the forms from the CONP website at [www.dhss.state.mo.us/con] www.dhss.mo.gov/con.

AUTHORITY: section 197.320, RSMo 2000. Original rule filed June 2, 1994, effective Nov. 30, 1994. For intervening history, please consult the **Code of State Regulations**. Emergency amendment filed Aug. 14, 2006, effective Aug. 28, 2006, expires Feb. 23, 2007. A proposed amendment covering this same material is published in this issue of the **Missouri Register**.

Title 19—DEPARTMENT OF HEALTH AND SENIOR SERVICES

Division 60—Missouri Health Facilities Review Committee Chapter 50—Certificate of Need Program

EMERGENCY AMENDMENT

19 CSR 60-50.410 Letter of Intent Package. This amendment modifies the address in sections (3) and (6).

PURPOSE: *This rule is amended because SB 616 changed the category name of long-term care facilities, the Certificate of Need Program office was moved to a new physical location, changed its website address, and responded to a reorganization of the Department of Health and Senior Services.*

EMERGENCY STATEMENT: *This emergency amendment is necessary to fulfill a compelling governmental interest in order to implement the requirements of CCS HCS SCS SB 616, 93rd General Assembly, Second Regular Session (2006), which changes the licensure category "residential care facility I" to "residential care facility" and the licensure category "residential care facility II" to "assisted living facility," and to preserve a compelling governmental interest in health care cost containment. It also requires rewriting the Certificate of Need (CON) rules in order to replace the previous office mail information with the new contact information. The CON statutes, sections 197.300 to 197.366, RSMo, were enacted to ensure the preservation of health care access, the prevention of unnecessary duplication, the containment of health care costs, and the reasonable distribution of health services in Missouri.*

Therefore, the Missouri Health Facilities Review Committee (committee) files this emergency amendment because it is also necessary to preserve the public health, safety and welfare of Missouri citizens by ensuring that sufficient quantity and quality care continue to be provided in long-term care facilities impacted by CCS HCS SCS SB 616. The committee believes this emergency amendment to be fair to all interested parties under these circumstances so that the committee may give clear guidance to health care facilities, physicians, investors, and other prospective applicants for their planning purposes. Failure to immediately update the CON rules to provide reasonable and accurate contact information for these applications would negatively impact the state's ability to forecast need, create a confusing regulatory environment for health care providers, and impair committee's ability to meet needs. The committee wishes to reduce unnecessary applicant expense and time in the preparation of CON applications, and to accurately meet the health care needs of Missouri without unnecessarily increasing health care costs.

This emergency amendment limits its scope to the circumstances creating the emergency and complies with the protections extended by the Missouri and United States Constitutions. The committee finds

that an emergency amendment is necessary to preserve health care access, allow health care providers to more easily contact the CON office, and prevent negative impacts to the public health, safety, and welfare of the citizens of Missouri. This emergency amendment was filed August 14, 2006, to become effective August 28, 2006, and will expire on February 23, 2007.

(3) If an exemption is sought for [an] a residential care or assisted living facility (RCF/ALF) [I or II] pursuant to section 197.312, RSMo, applicants shall submit documentation that this facility had previously been owned or operated for or, on behalf of St. Louis City.

(6) The most current version of Forms MO 580-1860 and MO 580-2375 may be obtained by mailing a written request to the CONP, [915G Leslie Boulevard] PO Box 570, Jefferson City, MO 65101/1/2, or in person at the CONP Office, or, if technically feasible, by downloading a copy of the forms from the CONP website at [www.dhss.state.mo.us/con] www.dhss.mo.gov/con.

AUTHORITY: section 197.320, RSMo 2000. Emergency rule filed Aug. 29, 1997, effective Sept. 8, 1997, expired March 6, 1998. Original rule filed Aug. 29, 1997, effective March 30, 1998. For intervening history, please consult the *Code of State Regulations*. Emergency amendment filed Aug. 14, 2006, effective Aug. 28, 2006, expires Feb. 23, 2007. A proposed amendment covering this same material is published in this issue of the *Missouri Register*.

**Title 19—DEPARTMENT OF HEALTH AND
SENIOR SERVICES
Division 60—Missouri Health Facilities Review
Committee
Chapter 50—Certificate of Need Program**

EMERGENCY AMENDMENT

19 CSR 60-50.430 Application Package. This amendment modifies the address in sections (4) and (6).

PURPOSE: This rule is amended because the Certificate of Need Program office was moved to a new physical location, changed its website address, and responded to a reorganization of the Department of Health and Senior Services.

EMERGENCY STATEMENT: This emergency amendment is necessary to fulfill a compelling governmental interest which requires rewriting the Certificate of Need (CON) rules in order to replace the previous office mail information with the new contact information and to preserve a compelling governmental interest in health care cost containment. The U.S. mail forwarding service has expired since the October 25, 2005, CON Program office move, and time-critical mail is being returned to CON applicants, attorneys and others. This can result in missed deadlines and substantial delays in conducting business with the public. The CON statutes, sections 197.300 to 197.366, RSMo, were enacted to ensure the preservation of health care access, the prevention of unnecessary duplication, the containment of health care costs, and the reasonable distribution of health services in Missouri.

Therefore, the Missouri Health Facilities Review Committee (committee) files this emergency amendment because it is also necessary to preserve the public health, safety and welfare of Missouri citizens by ensuring that sufficient quantity and quality care continue to be provided to CON applicants and the public. The committee believes this emergency amendment to be fair to all interested parties under these circumstances so that the committee may continue to give clear guidance to health care facilities, physicians, investors, and other prospective applicants for their planning purposes. Failure to immediately update the CON rules to provide reasonable and accurate

contact information for these applications would negatively impact the state's ability to forecast need, create a confusing regulatory environment for health care providers, and impair committee's ability to meet needs. The committee wishes to reduce unnecessary applicant expense and time in the preparation of CON applications, and to accurately meet the health care needs of Missouri without unnecessarily increasing health care costs.

This emergency amendment limits its scope to the circumstances creating the emergency and complies with the protections extended by the *Missouri and United States Constitutions*. The committee finds that an emergency amendment is necessary to preserve health care access, allow health care providers to more easily contact the CON office, and prevent negative impacts to the public health, safety, and welfare of the citizens of Missouri. This emergency amendment was filed August 14, 2006, to become effective August 28, 2006, and will expire on February 23, 2007.

(4) The Proposal Description shall include documents which:

(B) Describe the developmental details including:

1. A legible city or county map showing the exact location of the facility or health service, and a copy of the site plan showing the relation of the project to existing structures and boundaries;

2. Preliminary schematics for the project that specify the functional assignment of all space which will fit on an eight and one-half inch by eleven inch (8 1/2" × 11") format (not required for replacement equipment projects). The Certificate of Need Program (CONP) staff may request submission of an electronic version of the schematics, when appropriate. The function for each space, before and after construction or renovation, shall be clearly identified and all space shall be assigned;

3. Evidence of submission of architectural plans to the Division of [Senior Services and] Regulation and Licensure, Department of Health and Senior Services, for long-term care projects and other facilities (not required for replacement equipment projects);

4. For long-term care proposals, existing and proposed gross square footage for the entire facility and for each institutional service or program directly affected by the project. If the project involves relocation, identify what will go into vacated space;

5. Documentation of ownership of the project site, or that the site is available through a signed option to purchase or lease; and

6. Proposals which include major and other medical equipment should include an equipment list with prices and documentation in the form of bid quotes, purchase orders, catalog prices, or other sources to substantiate the proposed equipment costs;

(C) Proposals for new hospitals, new or additional long-term care (LTC) beds, or new major medical equipment must define the community to be served:

1. Describe the service area(s) population using year 2010 populations and projections which are consistent with those provided by the Bureau of [Health Data Analysis] Informatics which can be obtained by contacting:

Chief, Bureau of [Health Data Analysis] Informatics
[Center for Health Information Management and
Evaluation (CHIME)]

**Section of Public Health Practice and Administrative
Support (SPHPAS)**

Division of Community and Public Health

Department of Health and Senior Services

PO Box 570, Jefferson City, MO 65102

Telephone: (573) [751-6278] 526-4805

There will be a charge for any of the information requested, and seven to fourteen (7-14) days should be allowed for a response from the [CHIME] SPHPAS. Information requests should be made to [CHIME] SPHPAS such that the response is received at least two (2) weeks before it is needed for incorporation into the CON application.

2. Use the maps and population data received from [CHIME] SPHPAS with the CON Applicant's Population Determination Method to determine the estimated population, as follows:

A. Utilize all of the population for zip codes entirely within the fifteen (15)-mile radius for LTC beds or geographic service area for hospitals and major medical equipment;

B. Reference a state highway map (or a map of greater detail) to verify population centers (see Bureau of *[Health Data Analysis Information]* Informatics) within each zip code overlapped by the fifteen (15)-mile radius or geographic service area;

C. Categorize population centers as either “in” or “out” of the fifteen (15)-mile radius or geographic service area and remove the population data from each affected zip code categorized as “out”;

D. Estimate, to the nearest ten percent (10%), the portion of the zip code area that is within the fifteen (15)-mile radius or geographic service area by “eyeballing” the portion of the area in the radius (if less than five percent (5%), exclude the entire zip code);

E. Multiply the remaining zip code population (total population less the population centers) by the percentage determined in (4)(C)2.D. (due to numerous complexities, population centers will not be utilized to adjust overlapped zip code populations in Jackson, St. Louis, and St. Charles counties or St. Louis City; instead, the total population within the zip code will be considered uniform and multiplied by the percentage determined in (4)(C)2.D.);

F. Add back the population center(s) “inside” the radius or region for zip codes overlapped; and

G. The sum of the estimated zip codes, plus those entirely within the radius, will equal the total population within the fifteen (15)-mile radius or geographic service area.

3. Provide other statistics, such as studies, patient origin or discharge data, Hospital Industry Data Institute’s information, or consultants’ reports, to document the size and validity of any proposed user-defined “geographic service area”;

(6) The most current version of Forms MO 580-2501, MO 580-2502, MO 580-2503, MO 580-2504, MO 580-2505, MO 580-1861, MO 580-1869 and MO 580-1863 may be obtained by mailing a written request to the Certificate of Need Program (CONP), *[915G Leslie Boulevard]* PO Box 570, Jefferson City, MO 65101/1/2, or in person at the CONP Office, or, if technically feasible, by downloading a copy of the forms from the CONP website at *[www.dhss.state.mo.us/conp]* *www.dhss.mo.gov/con*.

AUTHORITY: section 197.320, RSMo 2000. Emergency rule filed Aug. 29, 1997, effective Sept. 8, 1997, expired March 6, 1998. Original rule filed Aug. 29, 1997, effective March 30, 1998. For intervening history, please consult the Code of State Regulations. Emergency amendment filed Aug. 14, 2006, effective Aug. 28, 2006, expires Feb. 23, 2007. A proposed amendment covering this same material is published in this issue of the Missouri Register.

Title 19—DEPARTMENT OF HEALTH AND SENIOR SERVICES

Division 60—Missouri Health Facilities Review Committee Chapter 50—Certificate of Need Program

EMERGENCY AMENDMENT

19 CSR 60-50.450 Criteria and Standards for Long-Term Care.
This amendment modifies the address in sections (1), (2), (3), (7) and (9).

PURPOSE: This rule is amended because SB 616 changed the category name of long-term care facilities, the Certificate of Need Program office was moved to a new physical location, changed its website address, and responded to a reorganization of the Department of Health and Senior Services.

EMERGENCY STATEMENT: This emergency amendment is necessary to fulfill a compelling governmental interest in order to implement the requirements of CCS HCS SCS SB 616, 93rd General Assembly, Second Regular Session (2006), which changes the licensure category “residential care facility I” to “residential care facili-

ty” and the licensure category “residential care facility II” to “assisted living facility,” and to preserve a compelling government interest in health care cost containment. It also requires rewriting the Certificate of Need (CON) rules in order to replace the previous office mail information with the new contact information. The CON statutes, sections 197.300 to 197.366, RSMo, were enacted to ensure the preservation of health care access, the prevention of unnecessary duplication, the containment of health care costs, and the reasonable distribution of health services in Missouri.

Therefore, the Missouri Health Facilities Review Committee (committee) files this emergency amendment because it is also necessary to preserve the public health, safety and welfare of Missouri citizens by ensuring that sufficient quantity and quality care continue to be provided in long-term care facilities impacted by CCS HCS SCS SB 616. The committee believes this emergency amendment to be fair to all interested parties under these circumstances so that the committee may give clear guidance to health care facilities, physicians, investors, and other prospective applicants for their planning purposes. Failure to immediately update the CON rules to provide reasonable and accurate contact information for these applications would negatively impact the state’s ability to forecast need, create a confusing regulatory environment for health care providers, and impair committee’s ability to meet needs. The committee wishes to reduce unnecessary applicant expense and time in the preparation of CON applications, and to accurately meet the health care needs of Missouri without unnecessarily increasing health care costs.

This emergency amendment limits its scope to the circumstances creating the emergency and complies with the protections extended by the Missouri and United States Constitutions. The committee finds that an emergency amendment is necessary to preserve health care access, allow health care providers to more easily contact the CON office, and prevent negative impacts to the public health, safety, and welfare of the citizens of Missouri. This emergency amendment was filed August 14, 2006, to become effective August 28, 2006, and will expire on February 23, 2007.

(1) All additional long-term care (LTC) beds in nursing homes, hospitals, *[and]* residential care facilities **and assisted living facilities** (RCF/ALF), and beds in long-term acute hospitals are subject to the LTC bed minimum occupancy requirements (MOR) pursuant to sections 197.317 and 197.318(1), RSMo, with certain exemptions and exceptions pursuant to sections 197.305(7) and 197.312, RSMo, and LTC bed expansions and replacements pursuant to sections 197.318.8 through 197.318.10, RSMo.

(2) The MOR for additional LTC beds pursuant to section 197.318.1, RSMo, shall be met if the average occupancy for all licensed and available LTC beds located within the county and within fifteen (15) miles of the proposed site exceeded ninety percent (90%) during at least each of the most recent four (4) consecutive calendar quarters at the time of application filing as reported in the Division of *[Health Standards and]* Regulation and Licensure (*[DHSL/DRL]*), Department of Health and Senior Services, Quarterly Survey of Hospital and Nursing Home (or Residential Care Facility **and Assisted Living**) Bed Utilization and certified through a written finding by the *[DHSL/DRL]*, in which case the following population-based long-term care bed need methodology for the fifteen (15)-mile radius shall be used to determine the maximum size of the need:

(B) Approval of additional RCF/ALF beds will be based on a service area need determined to be sixteen (16) beds per one thousand (1,000) population age sixty-five (65) and older minus the current supply of RCF/ALF beds shown in the Inventory of Residential Care **and Assisted Living** Facility Beds as provided by the CONP which includes licensed and CON-approved beds.

(3) Replacement Chapter 198 beds qualify for an exception to the LTC bed MOR plus shortened information requirements and review time frames if an applicant proposes to—

(A) Relocate RCF/ALF beds within a six (6)-mile radius pursuant to section 197.318.8(4), RSMo;

(7) Any newly-licensed Chapter 198 facility established as a result of the Alzheimer's and dementia demonstration projects pursuant to Chapter 198, RSMo, or aging-in-place pilot projects pursuant to Chapter 198, RSMo, as implemented by the [DHSL/DRL, may be licensed by the [DHSL/DRL until the completion of each project. If a demonstration or pilot project receives a successful evaluation from the [DHSL/DRL and a qualified Missouri school or university, and meets the [DHSL/DRL standards for licensure, this will ensure continued licensure without a new CON.

(9) The most current version of Form MO 580-2352 may be obtained by mailing a written request to the CONP, [915G Leslie Boulevard] PO Box 570, Jefferson City, MO 65101/2, or in person at the CONP Office, or, if technically feasible, by downloading a copy of the forms from the CONP website at [www.dhss.state.mo.us/con] www.dhss.mo.gov/con.

AUTHORITY: section 197.320, RSMo 2000. Emergency rule filed Aug. 29, 1997, effective Sept. 8, 1997, expired March 6, 1998. Original rule filed Aug. 29, 1997, effective March 30, 1998. For intervening history, please consult the Code of State Regulations. Emergency amendment filed Aug. 14, 2006, effective Aug. 28, 2006, expires Feb. 23, 2007. A proposed amendment covering this same material is published in this issue of the Missouri Register.

**Title 19—DEPARTMENT OF HEALTH AND
SENIOR SERVICES
Division 60—Missouri Health Facilities Review
Committee
Chapter 50—Certificate of Need Program**

EMERGENCY AMENDMENT

19 CSR 60-50.470 Criteria and Standards for Financial Feasibility. This amendment modifies the address in sections (1) and (5).

PURPOSE: This rule is amended because SB 616 changed the category name of long-term care facilities, the Certificate of Need Program office was moved to a new physical location, and changed its website address.

EMERGENCY STATEMENT: This emergency amendment is necessary to fulfill a compelling governmental interest in order to implement the requirements of CCS HCS SCS SB 616, 93rd General Assembly, Second Regular Session (2006), which changes the licensure category "residential care facility I" to "residential care facility" and the licensure category "residential care facility II" to "assisted living facility," and to preserve a compelling governmental interest in health care cost containment. It also requires rewriting the Certificate of Need (CON) rules in order to replace the previous office mail information with the new contact information. The CON statutes, sections 197.300 to 197.366, RSMo, were enacted to ensure the preservation of health care access, the prevention of unnecessary duplication, the containment of health care costs, and the reasonable distribution of health services in Missouri.

Therefore, the Missouri Health Facilities Review Committee (committee) files this emergency amendment because it is also necessary to preserve the public health, safety and welfare of Missouri citizens by ensuring that sufficient quantity and quality care continue to be provided in long-term care facilities impacted by CCS HCS SCS SB 616. The committee believes this emergency amendment to be fair to all interested parties under these circumstances so that the committee may give clear guidance to health care facilities, physicians, investors, and other prospective applicants for their planning purposes. Failure to immediately update the CON rules to provide reasonable and accurate contact information for these applications

would negatively impact the state's ability to forecast need, create a confusing regulatory environment for health care providers, and impair committee's ability to meet needs. The committee wishes to reduce unnecessary applicant expense and time in the preparation of CON applications, and to accurately meet the health care needs of Missouri without unnecessarily increasing health care costs.

This emergency amendment limits its scope to the circumstances creating the emergency and complies with the protections extended by the Missouri and United States Constitutions. The committee finds that an emergency amendment is necessary to preserve health care access, allow health care providers to more easily contact the CON office, and prevent negative impacts to the public health, safety, and welfare of the citizens of Missouri. This emergency amendment was filed August 14, 2006, to become effective August 28, 2006, and will expire on February 23, 2007.

(1) Proposals for any new hospital, nursing home, [or] residential care facility, or assisted living facility construction must include documentation that the proposed costs per square foot are reasonable when compared to the latest "RS Means Construction Cost Data" available from Certificate of Need Program (CONP). Any proposal with costs in excess of the three-fourths (3/4) percentile must include justification for the higher costs.

(5) The most current version of Forms MO 580-1865 and MO 580-1866 may be obtained by mailing a written request to the [Certificate of Need Program] [CONP], [915G Leslie Boulevard] PO Box 570, Jefferson City, MO 65101/2, or in person at the CONP Office, or, if technically feasible, by downloading a copy of the forms from the CONP website at [www.dhss.state.mo.us/con] www.dhss.mo.gov/con.

AUTHORITY: section 197.320, RSMo 2000. Emergency rule filed Aug. 29, 1997, effective Sept. 8, 1997, expired March 6, 1998. Original rule filed Aug. 29, 1997, effective March 30, 1998. For intervening history, please consult the Code of State Regulations. Emergency amendment filed Aug. 14, 2006, effective Aug. 28, 2006, expires Feb. 23, 2007. A proposed amendment covering this same material is published in this issue of the Missouri Register.

**Title 19—DEPARTMENT OF HEALTH AND
SENIOR SERVICES
Division 60—Missouri Health Facilities Review
Committee
Chapter 50—Certificate of Need Program**

EMERGENCY AMENDMENT

19 CSR 60-50.600 Certificate of Need Decisions. This amendment modifies section (1).

PURPOSE: This rule is amended because the Certificate of Need Program office has updated to use of the latest edition of parliamentary procedures.

EMERGENCY STATEMENT: This emergency amendment is necessary to fulfill a compelling governmental interest in complying with the most recent version of parliamentary procedures which guide the conduct of Certificate of Need (CON) meetings and to preserve a compelling governmental interest in health care cost containment. Failure to use the most recent version calls into question the proper process for decision-making and may threaten the viability of actions taken. The CON statutes, sections 197.300 to 197.366, RSMo, were enacted to ensure the preservation of health care access, the prevention of unnecessary duplication, the containment of health care costs, and the reasonable distribution of health services in Missouri.

Therefore, the Missouri Health Facilities Review Committee (committee) files this emergency amendment because it is also necessary

to preserve the public health, safety and welfare of Missouri citizens by ensuring that sufficient quantity and quality care continue to be provided in long-term care facilities impacted by CCS HCS SCS SB 616. The committee believes this emergency amendment to be fair to all interested parties under these circumstances so that the committee may give clear guidance to health care facilities, physicians, investors, and other prospective applicants for their planning purposes. Failure to immediately update the CON rules use reasonable and accurate procedures for these applications would negatively impact the state's ability to forecast need, create a confusing regulatory environment for health care providers, and impair committee's ability to meet needs. The committee wishes to reduce unnecessary applicant expense and time in the preparation of CON applications, and to accurately meet the health care needs of Missouri without unnecessarily increasing health care costs.

This emergency amendment limits its scope to the circumstances creating the emergency and complies with the protections extended by the **Missouri and United States Constitutions**. The committee finds that an emergency amendment is necessary to preserve health care access, allow health care providers to use the more easily contact the CON office, and prevent negative impacts to the public health, safety, and welfare of the citizens of Missouri. This emergency amendment was filed August 14, 2006, to become effective August 28, 2006, and will expire on February 23, 2007.

(1) Decisions on full Certificate of Need (CON) applications and contested expedited applications shall be subject to the following:

(A) Parliamentary procedures for all meetings shall follow *Robert's Rules of Order*, newly revised [1990] 2000 edition, [9/10th edition.

AUTHORITY: section 197.320, RSMo 2000. Original rule filed June 2, 1994, effective Nov. 30, 1994. For intervening history, please consult the **Code of State Regulations**. Emergency amendment filed Aug. 14, 2006, effective Aug. 28, 2006, expires Feb. 23, 2007. A proposed amendment covering this same material is published in this issue of the **Missouri Register**.

Title 19—DEPARTMENT OF HEALTH AND SENIOR SERVICES

Division 60—Missouri Health Facilities Review Committee Chapter 50—Certificate of Need Program

EMERGENCY AMENDMENT

19 CSR 60-50.700 Post-Decision Activity. This amendment modifies the address in section (10).

PURPOSE: This rule is amended because the Certificate of Need Program office was moved to a new physical location, and changed its website address.

EMERGENCY STATEMENT: This emergency amendment is necessary to fulfill a compelling governmental interest which requires rewriting the Certificate of Need (CON) rules in order to replace the previous office mail information with the new contact information and to preserve a compelling governmental interest in health care cost containment. The U.S. mail forwarding service has expired since the October 25, 2005, CON Program office move, and time-critical mail is being returned to CON applicants, attorneys and others. This can result in missed deadlines and substantial delays in conducting business with the public. The CON statutes, sections 197.300 to 197.366, RSMo, were enacted to ensure the preservation of health care access, the prevention of unnecessary duplication, the containment of health care costs, and the reasonable distribution of health services in Missouri.

Therefore, the Missouri Health Facilities Review Committee (committee) files this emergency amendment because it is also necessary

to preserve the public health, safety and welfare of Missouri citizens by ensuring that sufficient quantity and quality care continue to be provided to CON applicants and the public. The committee believes this emergency amendment to be fair to all interested parties under these circumstances so that the committee may continue to give clear guidance to health care facilities, physicians, investors, and other prospective applicants for their planning purposes. Failure to immediately update the CON rules to provide reasonable and accurate contact information for these applications would negatively impact the state's ability to forecast need, create a confusing regulatory environment for health care providers, and impair committee's ability to meet needs. The committee wishes to reduce unnecessary applicant expense and time in the preparation of CON applications, and to accurately meet the health care needs of Missouri without necessarily increasing health care costs.

This emergency amendment limits its scope to the circumstances creating the emergency and complies with the protections extended by the **Missouri and United States Constitutions**. The committee finds that an emergency amendment is necessary to preserve health care access, allow health care providers to more easily contact the CON office, and prevent negative impacts to the public health, safety, and welfare of the citizens of Missouri. This emergency amendment was filed August 14, 2006, to become effective August 28, 2006, and will expire on February 23, 2007.

(10) The most current version of Forms MO 580-1871, MO 580-1863, and MO 580-1870 may be obtained by mailing a written request to the CONP, [915G Leslie Boulevard] PO Box 570, Jefferson City, MO 65101/2, or in person at the CONP Office, or, if technically feasible, by downloading a copy of the forms from the CONP website at [www.dhss.state.mo.us/con] www.dhss.mo.gov/con.

AUTHORITY: section 197.320, RSMo 2000. Original rule filed June 2, 1994, effective Nov. 30, 1994. For intervening history, please consult the **Code of State Regulations**. Emergency amendment filed Aug. 14, 2006, effective Aug. 28, 2006, expires Feb. 23, 2007. A proposed amendment covering this same material is published in this issue of the **Missouri Register**.

Title 19—DEPARTMENT OF HEALTH AND SENIOR SERVICES

Division 60—Missouri Health Facilities Review Committee Chapter 50—Certificate of Need Program

EMERGENCY AMENDMENT

19 CSR 60-50.800 Meeting Procedures. This amendment modifies the address in section (7).

PURPOSE: This rule is amended because the Certificate of Need Program office was moved to a new physical location and changed its website address.

EMERGENCY STATEMENT: This emergency amendment is necessary to fulfill a compelling governmental interest which requires rewriting the Certificate of Need (CON) rules in order to replace the previous office mail information with the new contact information and to preserve a compelling governmental interest in health care cost containment. The U.S. mail forwarding service has expired since the October 25, 2005, CON Program office move, and time-critical mail is being returned to CON applicants, attorneys and others. This can result in missed deadlines and substantial delays in conducting business with the public. The CON statutes, sections 197.300 to 197.366, RSMo, were enacted to ensure the preservation of health care access, the prevention of unnecessary duplication, the containment of health care costs, and the reasonable distribution of health services in Missouri.

Therefore, the Missouri Health Facilities Review Committee (committee) files this emergency amendment because it is also necessary to preserve the public health, safety and welfare of Missouri citizens by ensuring that sufficient quantity and quality care continue to be provided to CON applicants and the public. The committee believes this emergency amendment to be fair to all interested parties under these circumstances so that the committee may continue to give clear guidance to health care facilities, physicians, investors, and other prospective applicants for their planning purposes. Failure to immediately update the CON rules to provide reasonable and accurate contact information for these applications would negatively impact the state's ability to forecast need, create a confusing regulatory environment for health care providers, and impair committee's ability to meet needs. The committee wishes to reduce unnecessary applicant expense and time in the preparation of CON applications, and to accurately meet the health care needs of Missouri without unnecessarily increasing health care costs.

This emergency amendment limits its scope to the circumstances creating the emergency and complies with the protections extended by the *Missouri and United States Constitutions*. The committee finds that an emergency amendment is necessary to preserve health care access, allow health care providers to use the more easily contact the CON office, and prevent negative impacts to the public health, safety, and welfare of the citizens of Missouri. This emergency amendment was filed August 14, 2006, to become effective August 28, 2006, and will expire on February 23, 2007.

(7) The most current version of Form MO 580-1869 may be obtained by mailing a written request to the CONP, [915G Leslie Boulevard] PO Box 570, Jefferson City, MO 65101/2, or in person at the CONP Office, or, if technically feasible, by downloading a copy of the form from the CONP website at [www.dhss.state.mo.us/con] www.dhss.mo.gov/con.

AUTHORITY: section 197.320, RSMo 2000. Original rule filed June 2, 1994, effective Nov. 30, 1994. For intervening history, please consult the *Code of State Regulations*. Emergency amendment filed Aug. 14, 2006, effective Aug. 28, 2006, expires Feb. 23, 2007. A proposed amendment covering this same material is published in this issue of the *Missouri Register*.

**Title 19—DEPARTMENT OF HEALTH AND
SENIOR SERVICES
Division 60—Missouri Health Facilities Review
Committee
Chapter 50—Certificate of Need Program**

EMERGENCY AMENDMENT

19 CSR 60-50.900 Administration. This amendment modifies section (6).

PURPOSE: This rule is amended because the Certificate of Need Program updated the Internet information posting after its office was moved to a new physical location.

EMERGENCY STATEMENT: This emergency amendment is necessary to fulfill a compelling governmental interest which requires rewriting the Certificate of Need (CON) rules in order to replace the previous office mail information with the new contact information and to preserve a compelling governmental interest in health care cost containment. The U.S. mail forwarding service has expired since the October 25, 2005, CON Program office move, and time-critical mail is being returned to CON applicants, attorneys and others. This can result in missed deadlines and substantial delays in conducting business with the public. The CON statutes, sections 197.300 to 197.366, RSMo, were enacted to ensure the preservation of health care access, the prevention of unnecessary duplication, the contain-

ment of health care costs, and the reasonable distribution of health services in Missouri.

Therefore, the Missouri Health Facilities Review Committee (committee) files this emergency amendment because it is also necessary to preserve the public health, safety and welfare of Missouri citizens by ensuring that sufficient quantity and quality care continue to be provided to CON applicants and the public. The committee believes this emergency amendment to be fair to all interested parties under these circumstances so that the committee may continue to give clear guidance to health care facilities, physicians, investors, and other prospective applicants for their planning purposes. Failure to immediately update the CON rules to provide reasonable and accurate contact information for these applications would negatively impact the state's ability to forecast need, create a confusing regulatory environment for health care providers, and impair committee's ability to meet needs. The committee wishes to reduce unnecessary applicant expense and time in the preparation of CON applications, and to accurately meet the health care needs of Missouri without unnecessarily increasing health care costs.

This emergency amendment limits its scope to the circumstances creating the emergency and complies with the protections extended by the *Missouri and United States Constitutions*. The committee finds that an emergency amendment is necessary to preserve health care access, allow health care providers to use the more easily contact the CON office, and prevent negative impacts to the public health, safety, and welfare of the citizens of Missouri. This emergency amendment was filed August 14, 2006, to become effective August 28, 2006, and will expire on February 23, 2007.

(6) The committee and CONP staff shall [publish quarterly reports] post information on the CONP website containing the status of reviews being conducted, the reviews completed since the last report, and the decisions made, plus an annual summary of activities for the past calendar year.

AUTHORITY: section 197.320, RSMo 2000. Original rule filed June 2, 1994, effective Nov. 30, 1994. For intervening history, please consult the *Code of State Regulations*. Emergency amendment filed Aug. 14, 2006, effective Aug. 28, 2006, expires Feb. 23, 2007. A proposed amendment covering this same material is published in this issue of the *Missouri Register*.

The Secretary of State shall publish all executive orders beginning January 1, 2003, pursuant to section 536.035.2, RSMo Supp. 2005.

EXECUTIVE ORDER

06-29

WHEREAS, emergencies may arise at any time, including but not limited to power outage due to tornado, rain, snow or ice storm, propane or gas shortages due to extremely cold conditions requiring carriers to travel out of state to haul fuel and distribute such fuel upon their return, flooding conditions, potential terrorist attack, or other unforeseen emergencies; and

WHEREAS, many of these emergencies occur after normal working hours or on holidays; and

WHEREAS, the safety and welfare of the inhabitants of the affected areas may require the rapid identification of an emergency situation that necessitates the need to suspend state enforcement of federal commercial vehicle and driver laws; and

WHEREAS, Section 390.23 of Title 49, Code of Federal Regulations, provides that a Governor of a State, or the Governor's authorized representatives having authority to declare emergencies, may declare an emergency thereby exempting motor carriers or drivers operating a commercial vehicle from the Federal Motor Carrier Safety Regulations, Parts 390-399, both while providing assistance to the emergency relief efforts during the emergency, and while returning empty to the motor carrier's terminal or driver's normal work reporting location; and

NOW THEREFORE, I, Matt Blunt, Governor of the State of Missouri, by virtue of the authority vested in me by the Constitution and laws of the State of Missouri, do hereby order as follows:

1. The Director of the Missouri Department of Transportation is authorized to issue an emergency declaration of a regional emergency within the meaning of 49 CFR section 390.23(a)(1) or a local emergency within the meaning of 49 CFR section 390.23(a)(2) for the limited purpose of temporarily suspending the usual requirements of Parts 390-399 of Title 49, Code of Federal Regulations, with reference to motor carriers and operators of commercial motor vehicles, when such official determines that an emergency situation exists which requires the suspension of federal commercial motor vehicle and driver laws. An emergency declaration issued pursuant to this order shall not exceed the duration of the motor carrier's or driver's direct assistance in providing emergency relief, or five days from the date of the initial declaration of the emergency, whichever is less.

2. The Director of the Missouri Department of Transportation, or the Director's designee, is also authorized to issue overdimension and overweight permits for commercial motor carriers engaged in interstate and intrastate disaster relief efforts in the affected regions identified by the regional or local emergency declaration(s) authorized in paragraph 1 above, subject to the following application requirements in obtaining such a permit:

The permittee will be required to supply:

Year, Make and License plate number of the power unit and trailer;
Size, Make and Serial Number (last 4 digits) of commodity being hauled;
Origin, Destination and Consecutive Routing;
Overall Width, Height, Length and length of trailer and load only; and
Date of Movement.

The permit process can be expedited by calling:

866-831-6277
573-526-5314; or
573-526-5312.

This Executive Order shall allow continuous movement, including nighttime and moves during curfew hours and holiday restriction periods. Clearance lights in lieu of flags and reflectorized oversize load signs mounted on the front and rear of the vehicle and load are required for nighttime movement or when visibility is less than 500'. One (1) escort shall be required to the rear of the vehicle and load on interstates and other divided highways and such escort shall be required for the front of the vehicle and load on all other highways when the load width exceeds 12'4".

However, this Executive Order shall not suspend the applicability of the standard overdimension/overweight permit fee requirements; and

3. The Director of the Missouri Department of Transportation, or the Director's designee, is also authorized to waive the commercial motor vehicle regulatory requirements regarding the purchase of trip permits for registration and fuel for commercial motor carriers engaged in interstate disaster relief efforts in any of the affected states identified by regional emergency declarations authorized in paragraph 1 above; and

4. The Director of the Missouri Department of Transportation, or the Director's designee, shall notify the Governor's office as soon as possible of any emergency declarations issued pursuant to this order.

This order shall terminate on January 1, 2007, unless extended or revoked in whole or in part.



IN WITNESS WHEREOF, I have hereunto set my hand and caused to be affixed the Great Seal of the State of Missouri in the City of Jefferson on this 11th day of August 2006.

A handwritten signature in black ink, reading "Matt Blunt". The signature is written in a cursive style with a horizontal line underneath it.

Matt Blunt
Governor

ATTEST:

A handwritten signature in black ink, reading "Robin Carnahan". The signature is written in a cursive style with a horizontal line underneath it.

Robin Carnahan
Secretary of State

Under this heading will appear the text of proposed rules and changes. The notice of proposed rulemaking is required to contain an explanation of any new rule or any change in an existing rule and the reasons therefor. This is set out in the Purpose section with each rule. Also required is a citation to the legal authority to make rules. This appears following the text of the rule, after the word "Authority."

Entirely new rules are printed without any special symbolology under the heading of the proposed rule. If an existing rule is to be amended or rescinded, it will have a heading of proposed amendment or proposed rescission. Rules which are proposed to be amended will have new matter printed in boldface type and matter to be deleted placed in brackets.

An important function of the *Missouri Register* is to solicit and encourage public participation in the rulemaking process. The law provides that for every proposed rule, amendment or rescission there must be a notice that anyone may comment on the proposed action. This comment may take different forms.

If an agency is required by statute to hold a public hearing before making any new rules, then a Notice of Public Hearing will appear following the text of the rule. Hearing dates must be at least thirty (30) days after publication of the notice in the *Missouri Register*. If no hearing is planned or required, the agency must give a Notice to Submit Comments. This allows anyone to file statements in support of or in opposition to the proposed action with the agency within a specified time, no less than thirty (30) days after publication of the notice in the *Missouri Register*.

An agency may hold a public hearing on a rule even though not required by law to hold one. If an agency allows comments to be received following the hearing date, the close of comments date will be used as the beginning day in the ninety (90)-day-count necessary for the filing of the order of rulemaking.

If an agency decides to hold a public hearing after planning not to, it must withdraw the earlier notice and file a new notice of proposed rulemaking and schedule a hearing for a date not less than thirty (30) days from the date of publication of the new notice.

Fees. The board proposes to amend the title and subsection (1)(U), delete subsection (1)(W), reletter current subsection (1)(X), and add a new subsection (1)(X).

PURPOSE: *This amendment increases the certification fee; establishes the certification of licensure and eliminates the Architectural Routing Fee.*

(1) The following fees are established by the Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Landscape Architects:

(U) Certification Fee	[\$ 10] \$ 50
[(W) Architectural Routing Fee	\$ 25]
[(X)] (W) Insufficient Funds Check Charge	\$ 25
(X) Verification Fee	\$ 10

AUTHORITY: *section 327.041, RSMo Supp. [2003] 2005. Emergency rule filed Aug. 12, 1981, effective Aug. 22, 1981, expired Dec. 10, 1981. Original rule filed Aug. 12, 1981, effective Nov. 12, 1981. For intervening history, please consult the Code State of Regulations. Amended: Filed Aug. 11, 2006.*

PUBLIC COST: *This proposed amendment is estimated to cost state agencies or political subdivisions an increase of approximately five thousand three hundred fifty-six dollars and four cents (\$5,356.04) annually for the life of the rule. It is anticipated that the costs will recur for the life of the rule, may vary with inflation and are expected to increase at the rate projected by the Legislative Oversight Committee.*

PRIVATE COST: *This proposed amendment is estimated to cost private entities an increase of approximately eight thousand nine hundred eighty dollars (\$8,980) annually for the life of the rule. It is anticipated that the costs will recur for the life of the rule, may vary with inflation and are expected to increase at the rate projected by the Legislative Oversight Committee.*

NOTICE TO SUBMIT COMMENTS: *Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Board for Architects, Professional Engineers, Professional Land Surveyors and Landscape Architects, PO Box 184, Jefferson City, MO 65102 or via email at moapels@pr.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the Missouri Register. No public hearing is scheduled.*

Proposed Amendment Text Reminder:

Boldface text indicates new matter.

[Bracketed text indicates matter being deleted.]

[Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT]

[Division 30—Missouri Board for Architects,
Professional Engineers, Professional Land Surveyors,
and Landscape Architects]

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL
INSTITUTIONS AND PROFESSIONAL
REGISTRATION

Division 2030—Missouri Board for Architects, Professional
Engineers, Professional Land Surveyors, and Landscape
Architects

Chapter 6—Fees

PROPOSED AMENDMENT

[4 CSR 30-6.015] 20 CSR 2030-6.015 Application, Renewal,
Reinstatement, [Reregistration] Relicensure and Miscellaneous

PUBLIC ENTITY FISCAL NOTE

I. RULE NUMBER

Title 4 -Department of Economic Development

Division 30 - Missouri Board for Architects, Professional Engineers, Professional Land Surveyors and Landscape Architects

Chapter 5 - Examinations

Proposed Amendment - 4 CSR 30-6.015 Application, Renewal, Reinstatement, Relicensure and Miscellaneous Fees

Prepared by the Division of Professional Registration on May 26, 2006.

II. SUMMARY OF FISCAL IMPACT

Affected Agency or Political Subdivision	Estimated Annual Cost of Compliance
Missouri Board for Architects, Professional Engineers, Professional Land Surveyors and Landscape Architects	\$5,356.04
Total Annual Cost of Compliance for the Life of the Rule	
	\$5,356.04

III. WORKSHEET

CALCULATION OF EXPENSE AND EQUIPMENT AND PERSONAL SERVICE COSTS:

The following duties will be performed by:

- Licensing Technician II and Executive I - Researching and verifying information and preparing document for the Executive Director's review and approval.
- Executive Director - Review, approve and sign verification.

COMPLETION OF VERIFICATIONS

STAFF	ANNUAL SALARY	SALARY TO INCLUDE FRINGE BENEFIT	HOURLY SALARY	COST PER MINUTE	TIME PER APPLICATION	COST PER APPLICATION	TOTAL COST
Executive Director	\$53,400	\$75,011	\$36.06	\$0.60	5 minutes	\$3.01	\$2,494.36
Licensing Tech II	\$26,292	\$36,932	\$17.76	\$0.30	10 minutes	\$2.96	\$2,456.24
Total Personal Service Costs							\$4,950.60

COMPLETION OF CERTIFICATIONS

STAFF	ANNUAL SALARY	SALARY TO INCLUDE FRINGE BENEFIT	HOURLY SALARY	COST PER MINUTE/HOUR	TIME PER APPLICATION	COST PER APPLICATION	TOTAL COST
Executive Director	\$53,400	\$75,011	\$36.06	\$0.60	5 minutes	\$3.01	\$51.09
Executive I	\$29,784	\$41,838	\$20.11	\$20.11	1 hour	\$20.11	\$341.94
Total Personal Service Costs							\$393.03

Expense and Equipment and Personal Service Dollars

Letterhead Printing	\$0.15
Plain Paper	\$0.05
Envelope for Mailing Application	\$0.16
Postage for Mailing registration	\$0.37
Total Per Applicant:	\$0.73

Total Expense and Equipment Costs: \$12.41

IV. ASSUMPTION

1. The board anticipates 830 verifications and 17 certifications will be completed annually.
2. Employee's salaries were calculated using their annual salary multiplied by 40.47% for fringe benefits and then were divided by 2080 hours per year to determine the hourly salary. The hourly salary was then divided by 60 minutes to determine the cost per minute. The cost per minute was then multiplied by the amount of time the Licensure Technician II spent on the processing of the application. The total cost was based on the cost per request multiplied by the estimated number of requests received on an annual basis.
3. It is anticipated that the total cost will recur annually for the life of the rule, may vary with inflation and is expected to increase annually at the rate projected by the Legislative Oversight Committee.

NOTE: The public fiscal note for this rule only reflects the cost for this particular process. However, private entity fees are set at an amount to cover the total actual cost incurred by the board, which includes personal service, expense and equipment and transfers.

PRIVATE ENTITY FISCAL NOTE**I. RULE NUMBER****Title 4 -Department of Economic Development****Division 30 - Missouri Board for Architects, Professional Engineers, Professional Land Surveyors and Landscape Architects****Chapter 6 - Fees****Proposed Amendment - 4 CSR 30-6.015 Application, Renewal, Reinstatement, Relicensure and Miscellaneous Fees**

Prepared November 1, 2005 by the Division of Professional Registration

II. SUMMARY OF FISCAL IMPACT

Estimate the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by type of the business entities which would likely be affected:	Estimated increase cost of compliance with the rule by affected entities:
17	Licenseses (certification fee @ \$40)	\$680
830	Individuals (verification fee @ \$10)	\$8,300
	Estimated Annual Increase Cost of Compliance for the Life of the Rule	\$8,980

III. WORKSHEET

See table above.

IV. ASSUMPTION

1. The board anticipates 17 certifications and 830 verifications will be completed annually.
2. The board ceased routing architectural drawings to members of the Architectural Division over ten years ago, therefore, no fiscal impact is shown by eliminating the Architectural Routing Fee.
3. It is anticipated that the total cost will recur annually for the life of the rule, may vary with inflation and is expected to increase annually at the rate projected by the Legislative Oversight Committee

NOTE: The board is statutorily obligated to enforce and administer the provisions of Chapter 326, RSMo. Pursuant to Section 326.319, RSMo, the board shall by rule and regulation set the amount of fees authorized by Chapter 326, RSMo so that the revenue produced is sufficient, but not excessive, to cover the cost and expense to the board for administering the provisions of Chapter 326, RSMo. This proposed amendment is necessary because the board's projected revenue will not support the expenditures necessary to enforce and administer the provisions of Chapter 326, RSMo, which will result in an endangerment to the health, welfare, and safety of the public.

[Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT]

[Division 110—Missouri Dental Board]

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL
INSTITUTIONS AND PROFESSIONAL
REGISTRATION

Division 2110—Missouri Dental Board
Chapter 2—General Rules

PROPOSED AMENDMENT

[4 CSR 110-2.110] 20 CSR 2110-2.110 Addressing the Public—
Dentists. The board is proposing to amend sections (6)–(8).

PURPOSE: This amendment clarifies announcements made to the public.

(6) Any announcement of services by a general practitioner shall state in a prominent manner that the dental practice is one of general dentistry.

[(A)] This announcement of the general practice of dentistry shall be clearly legible, with print equal to or larger than the announcement of services, and clearly audible, with speech volume and pace equal to the announcement of services. **Such announcement of services shall be in compliance with section 332.321.2(14)(f), RSMo.**

[(B) If terms implying services associated with specialty practices are used, a disclaimer must be used. Such terms include, but are not limited to: orthodontics, braces, endodontics, root canals, periodontics, gum surgery, oral surgery, extractions, prosthodontics, crowns, bridges, full or partial dentures. The disclaimer shall be clearly legible, with print equal to or larger than the announcement of services, and clearly audible, with speech volume and pace equal to the announcement of services. The disclaimer shall state: "This provider is not a specialist in (list specialty areas referenced)."]

(7) Any announcement or advertisement of services by a dentist implying [non-/specialty [interest] areas which are not recognized by the American Dental Association (ADA) must include a disclaimer. [Non-s/Specialty [interest] areas **not recognized by the ADA** include, but are not limited to: [bleaching,] cosmetic dentistry, implantology, implant dentistry and temporomandibular joint (TMJ) therapy. These or other terms which imply a [non-/specialty [interest] area **not recognized by the ADA** must be accompanied by a disclaimer that is clearly legible, with print equal to or larger than the announcement of services, and clearly audible, with speech volume and pace equal to the announcement of services. The disclaimer shall state: "(list [non-/specialty [interest] areas **not recognized by the ADA**) (is/are) [non-/specialty [interest] area(s) **not recognized by the ADA** that requires no specific educational training to advertise this service." **Dentists may advertise specialty areas not recognized by the ADA without a disclaimer if training in the non-recognized specialty area(s) was an integral part of a post graduate program accredited by the Commission on Dental Accreditation (CODA).**

(8) [Any announcement or advertisement of conscious sedation services, which includes but is not limited to sleep dentistry and twilight sleep, cannot be used in any advertising, unless accompanied by the following disclaimer. The disclaimer shall be clearly legible, with print equal to or larger than the announcement of services, and clearly audible, with speech volume and pace equal to the announcement of services. The disclaimer shall state: "Conscious sedation is taught as part of post-graduate residency programs approved by the American Dental Association. Dr. (Insert Name) (has/has not) completed an American Dental

Association approved residency program in which conscious sedation is taught."] **Without possessing a deep sedation/general anesthesia permit, licensees shall not advertise such terms as sleep dentistry, snooze dentistry, and twilight sleep. The terms sleep dentistry, snooze dentistry and twilight sleep may not be used in the announcement or advertisement of conscious sedation services.**

AUTHORITY: sections 332.031, RSMo 2000 and 332.321, RSMo Supp. [2001] 2005. Original rule filed Dec. 12, 1975, effective Jan. 12, 1976. For intervening history, please consult the *Code of State Regulations*. Amended: Filed Aug. 11, 2006.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivision more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Dental Board, Sharlene Rimiller, Executive Director, PO Box 1367, Jefferson City, MO 65102, by faxing (573) 751-8216 or via email at dental@pr.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the *Missouri Register*. No public hearing is scheduled.

[Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT]

[Division 110—Missouri Dental Board]

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL
INSTITUTIONS AND PROFESSIONAL
REGISTRATION

Division 2110—Missouri Dental Board
Chapter 2—General Rules

PROPOSED AMENDMENT

[4 CSR 110-2.114] 20 CSR 2110-2.114 Patient Abandonment. The board is proposing to amend the original Purpose statement and sections (1) and (2).

PURPOSE: This amendment requires a dentist to notify active patients in writing when s/he moves his/her practice.

PURPOSE: This rule defines the duty of a dentist to [existing] active patients when s/he moves his/her practice to a location inconvenient to his/her [existing] active patients.

(1) Any duly registered and currently licensed dentist in Missouri who moves his/her practice to a location which is inconvenient to his/her [existing] active patients or who ceases to practice dentistry or who shares a fee in any patient whose treating dentist moves to an inconvenient location or ceases to practice dentistry, upon request of that patient, or the person responsible for payment for that patient, shall refund an appropriate portion of the fee received for an unfinished treatment or make arrangements for the treatment to be completed by a dentist acceptable to the patient for no additional fee. **Active patients are those who have received care and/or treatment within the previous twelve (12) months.**

(2) Upon the relocation or cessation of practice described in section (1) of this rule, the treating dentist, within thirty (30) days, shall notify in writing all his/her active patients with unfinished services or treatments of their rights under section (1) of this rule. Dentists who share in the fee of any patient affected by this rule also shall notify

the patient of his/her rights. This notification may be made together with the treating dentist in one (1) notice.

AUTHORITY: section 332.031, RSMo [1986] 2000. Original rule filed April 16, 1985, effective Aug. 26, 1985. Amended: Filed Aug. 11, 2006.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will cost private entities approximately \$.75 per patient in the aggregate. It is anticipated that the total cost will recur annually for the life of the rule, may vary with inflation and is expected to increase annually at the rate projected by the Legislative Oversight Committee.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Dental Board, Sharlene Rimiller, Executive Director, PO Box 1367, Jefferson City, MO 65102, by faxing (573) 751-8216 or via email at dental@pr.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

PRIVATE ENTITY FISCAL NOTE

I. RULE NUMBER

Title 4 -Department of Economic Development

Division 110 - Missouri Dental Board

Chapter 2 - General Rules

Proposed Rule - 4 CSR 110-2.114 Patient Abandonment

Prepared September 11, 2006 by the Division of Professional Registration

II. SUMMARY OF FISCAL IMPACT

Estimate the number of entities by class which would likely be affected by the adoption of the proposed amendment:	Classification by type of the business entities which would likely be affected:	Estimated cost for compliance with the amendment by affected entities:
115	Notification per patient (letterhead, envelope and stamp @ \$.75)	\$.75 per patient
	Estimated Annual Cost of Compliance for the Life of the Rule	\$.75 per patient

III. WORKSHEET

See table above.

IV. ASSUMPTION

1. This rule obligates the dentist to the patient. The board routinely receives changes of address, however, the dentist does not identify if the change of address is one where the dentist has moved his/her location somewhere that is inconvenient to his/her patients or if they have ceased to do business and want their address changed to a home address. Therefore, the board is unable to estimate the number of dentists affected by the proposed amendment.
2. The board processed approximately 230 address changes for dentists and dental specialists during FY05. The board only maintains mailing addresses, which could be their business or home, therefore, the board is unable determine how many of these 230 dentists and specialists actually moved their office to a location which is inconvenient to his/her active patients or who ceased doing business. For the purposes of this fiscal note, the board estimates about a half of the address changes would fall within this category. The board is unable to estimate how many patients of each of these dentists would require the written notification. Some dentists may have a very high active patient base while others close to retirement may have a very low active patient base. Therefore, the board is estimating each dentist affected by the proposed amendment would spend approximate \$.75 per patient for notification of the address change.

[Title 4—DEPARTMENT OF ECONOMIC DEVELOPMENT]

[Division 150—State Board of Registration for the Healing Arts]

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

Division 2150—State Board of Registration for the Healing Arts

Chapter 2—Licensing of Physicians and Surgeons

PROPOSED AMENDMENT

[4 CSR 150-2.125] 20 CSR 2150-2.125 Continuing Medical Education. The board is proposing to amend sections (1), (6) and (7).

PURPOSE: *This amendment revises the yearly requirement of continuing medical education (CME) to a biennial requirement.*

(1) Effective February 1, *[2006] 2007*, each licensee~~/~~, *on a year-ly basis,* shall complete and report at least *[twenty-five (25)] fifty (50)* hours of continuing medical education **every two (2) years**. The board shall not issue a renewal of a licensee's certificate of registration unless the licensee demonstrates completion of *[twenty-five (25)] fifty (50)* hours of continuing medical education accredited by the American Osteopathic Association (AOA) as Category 1-A or 2-A, by the American Medical Association (AMA) as Category 1 or **by the American Academy of Family Practice Prescribed Credit**, in the **two (2)** immediately preceding reporting periods. A licensee is not required to complete any continuing medical education hours in the renewal period in which the licensee is initially licensed to practice the healing arts in Missouri if the licensee has not previously held a permanent license to practice the healing arts in Missouri or any other state in the United States of America. The period for completion of the continuing medical education requirements shall be the *[twelve (12)] twenty-four (24)*-month period beginning January 1 **of each even-numbered year** and ending December 31 **of each odd-numbered year**. A licensee who has failed to obtain and report, in a timely fashion, *[twenty-five (25)] fifty (50)* hours of continuing medical education shall not engage in the practice of medicine unless an extension is obtained pursuant to section (4) of this rule.

(A) A licensee shall be deemed to have complied with section (1) of this rule if the licensee completes *[twenty (20)] forty (40)* hours of continuing medical education and each course, seminar or activity includes a post-test of the material covered in the *[twenty (20)] forty (40)* continuing medical education hours. The *[twenty (20)] forty (40)* hours must all be accredited by the AOA as Category 1-A or by the AMA as Category 1.

(6) A licensee who participated in an AMA- or AOA-approved internship or residency program during the reporting period shall be deemed to have obtained the required hours of continuing medical education if at least *[thirty (30)] sixty (60)* days of the reporting period were spent in the internship or residency.

(7) A licensee who participated in a fellowship program in an approved teaching institution shall be deemed to have obtained the required hours of continuing medical education if at least *[thirty (30)] sixty (60)* days of the reporting period were spent in the fellowship and the fellowship is determined to be advanced training. Upon request, the licensee shall provide documentation from the fellowship program director verifying the number of days in the program and that the program is advanced training.

AUTHORITY: *sections 334.075 and 334.125, RSMo 2000. Original rule filed Oct. 16, 1991, effective March 9, 1992. For intervening*

history, please consult the Code of State Regulations. Amended: Filed Aug. 11, 2006.

PUBLIC COST: *This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.*

PRIVATE COST: *This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.*

NOTICE TO SUBMIT COMMENTS: *Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri State Board of Healing Arts, Attn: Tina Steinman, Executive Director, 3605 Missouri Blvd., PO Box 4, Jefferson City, MO 65102 or healingarts@pr.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the Missouri Register. No public hearing is scheduled.*

[Title 4—DEPARTMENT OF ECONOMIC DEVELOPMENT]

[Division 150—State Board of Registration for the Healing Arts]

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

Division 2150—State Board of Registration for the Healing Arts

Chapter 3—Licensing of Physical Therapists and Physical Therapist Assistants

PROPOSED AMENDMENT

[4 CSR 150-3.010] 20 CSR 2150-3.010 Applicants for Licensure as Professional Physical Therapists. The board is proposing to amend subsection (7)(A) and delete subsection (7)(C).

PURPOSE: *This amendment changes the existing rule regarding licensure requirements for physical therapists to be consistent with national standards.*

(7) If the applicant is from a country in which the predominate language is not English, the applicant must provide the board with the following:

(A) Test of English as a Foreign Language (TOEFL) Certificate in which the applicant has obtained on the TOEFL paper-based a minimum score of fifty-five (55) in each section and a total score of five hundred sixty (560); or TOEFL computer-based a total score of 220 or; TOEFL Internet based testing (TOEFL iBT) a minimum of the following in each section: Writing 24, Speaking 26, Reading Comprehension *[18] 21*, Listening Comprehension *[21] 18* **and a total score of 89; or**

(B) Test of Spoken English (TSE) Certificate in which the applicant has obtained a minimum score of fifty (50); *or/*.

[(C) Effective with the administration of the Internet-based TOEFL examination, the applicant must provide the board with a TOEFL Certificate in which the applicant has obtained a minimum score in each section and a total score as required by the FSBPT.]

AUTHORITY: *sections 334.125, RSMo 2000 and 334.530 and 334.550, RSMo Supp. 2005. Original rule filed Dec. 19, 1975, effective Dec. 29, 1975. For intervening history, please consult the Code of State Regulations. Amended: Filed Aug. 11, 2006.*

PUBLIC COST: *This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.*

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri State Board of Healing Arts, Attn: Tina Steinman, Executive Director, 3605 Missouri Blvd., PO Box 4, Jefferson City, MO 65102 or healingarts@pr.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the Missouri Register. No public hearing is scheduled.

[Title 4—DEPARTMENT OF ECONOMIC DEVELOPMENT]

[Division 150—State Board of Registration for the Healing Arts]

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

Division 2150—State Board of Registration for the Healing Arts

Chapter 3—Licensing of Physical Therapists and Physical Therapist Assistants

PROPOSED AMENDMENT

[4 CSR 150-3.203] 20 CSR 2150-3.203 Acceptable Continuing Education. The board is proposing to amend section (5).

PURPOSE: This amendment clarifies that the continuing education needs to be sponsored as well as approved by the APTA or any of its components and it further defines the information needed on CPR certification/recertification certificates.

(5) Acceptable continuing education is automatically approved if such course or activity is obtained as follows:

(A) Courses and activities sponsored/approved by the American Physical Therapy Association (APTA) or any of its components including state chapters and specialty sections/boards (i.e., the Missouri Physical Therapy Association (MPTA) or any other Professional Physical Therapy State Association); the American Medical Association (AMA), the American Osteopathic Association (AOA), or the Federation of State Boards of Physical Therapy (FSBPT) which at least in part relate to practice of physical therapy.

1. A continuing education document from the American Physical Therapy Association (APTA), or any of its components including state chapters and specialty sections/boards; (Missouri Physical Therapy Association (MPTA) or any other Professional Physical Therapy State Association); the American Medical Association (AMA), the American Osteopathic Association (AOA), the Federation of State Boards of Physical Therapy (FSBPT), specifically listing the continuing education course completed by the specified licensee, the date, time and place of the course, and the actual number of continuing education clock hours accumulated for the program shall be the document(s) necessary as proof of compliance if audited by the board to submit proof; or

2. A certificate of attendance bearing the original signature of the sponsor of the course/seminar/program specifically identifying the licensee as the certificate holder, the program title and the names of the presenter(s), the goals and objectives of the course/seminar/program, the location in which the course/seminar/program took place, and the actual number of continuing education clock hours accumulated for the program shall be the document(s) necessary as proof of compliance if audited by the board to submit proof.

(L) Initial CPR (Cardiopulmonary Resuscitation) certification or recertification shall be creditable for each hour of actual attendance in certification or recertification training.

1. A copy of a CPR certification or recertification certificate, specifically identifying the licensee as the person awarded such certification or recertification, as well as documentation as to the date and number of hours in actual attendance shall be the document(s) necessary as proof of compliance if audited by the board to submit proof. This credit for continuing education hours shall only be applicable once during each two (2)-year reporting period.

AUTHORITY: sections 334.125 and 334.507, RSMo [Supp. 1999] 2000. Original rule filed May 14, 1999, effective Dec. 30, 1999. Amended: Filed July 25, 2000, effective Dec. 30, 2000. Amended: Filed Aug. 25, 2000, effective Feb. 28, 2001. Amended: Filed Aug. 11, 2006.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri State Board of Healing Arts, Attn: Tina Steinman, Executive Director, 3605 Missouri Blvd., PO Box 4, Jefferson City, MO 65102 or healingarts@pr.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the Missouri Register. No public hearing is scheduled.

[Title 4—DEPARTMENT OF ECONOMIC DEVELOPMENT]

[Division 150—State Board of Registration for the Healing Arts]

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

Division 2150—State Board of Registration for the Healing Arts

Chapter 5—General Rules

PROPOSED AMENDMENT

[4 CSR 150-5.100] 20 CSR 2150-5.100 Collaborative Practice. The board is proposing to amend paragraph (3)(I)4. and subsection (4)(C).

PURPOSE: This amendment defines the number of full-time professionals that can be supervised by a physician in a collaborative practice arrangement.

(3) Methods of Treatment.

(I) Methods of treatment delegated and authority to administer, dispense, or prescribe drugs shall be subject to the following:

1. The physician retains the responsibility for ensuring the appropriate administering, dispensing, prescribing and control of drugs utilized pursuant to a collaborative practice arrangement in accordance with all state and federal statutes, rules, or regulations;

2. All labeling requirements outlined in section 338.059, RSMo shall be followed;

3. Consumer product safety laws and Class B container standards shall be followed when packaging drugs for distribution;

4. All drugs shall be stored according to the *United States Pharmacopeia* (USP), published August 1, 2006, recommended conditions, which is incorporated by reference, which can be obtained from USP, 12601 Twinbrook Parkway, Rockville, Maryland 20852-1790, USA, (800) 227-8772 or at <http://www.usp.org>. This rule does not incorporate any subsequent amendments or additions;

5. Outdated drugs shall be separated from the active inventory;
6. Retrieval dispensing logs shall be maintained for all prescription drugs dispensed and shall include all information required by state and federal statutes, rules, or regulations;

7. All prescriptions shall conform to all applicable state and federal statutes, rules, or regulations and shall include the name, address, and telephone number of the collaborating physician and collaborating advanced practice nurse;

8. A registered professional nurse shall not, under any circumstances, prescribe drugs;

9. An advanced practice nurse shall not, under any circumstances, prescribe controlled substances. The administering or dispensing of a controlled substance by a registered professional nurse or advanced practice nurse in a collaborative practice arrangement shall be accomplished only under the direction and supervision of the collaborating physician, or other physician designated in the collaborative practice arrangement, and shall only occur on a case-by-case determination of the patient's needs following verbal consultation between the collaborating physician and collaborating registered professional nurse or advanced practice nurse. The required consultation and the physician's directions for the administering or dispensing of controlled substances shall be recorded in the patient's chart and in the appropriate dispensing log. These recordings shall be made by the collaborating registered professional nurse or advanced practice nurse and shall be co-signed by the collaborating physician following a review of the records;

10. An advanced practice nurse or registered professional nurse in a collaborative practice arrangement may only dispense starter doses of medication to cover a period of time for seventy-two (72) hours or less with the exception of Title X family planning providers or publicly funded clinics in community health settings that dispense medications free of charge. The dispensing of drug samples, as defined in 21 U.S.C. section 353(c)(1), is permitted as appropriate to complete drug therapy; and

11. The medications to be administered, dispensed, or prescribed by a collaborating registered professional nurse or advanced practice nurse in a collaborative practice arrangement shall be consistent with the education, training, competence, and scopes of practice of the collaborating physician and collaborating registered professional nurse or advanced practice nurse.

(4) Review of Services.

(C) If a collaborative practice arrangement is used in clinical situations where a collaborating advanced practice nurse provides health care services that include the diagnosis and initiation of treatment for acutely or chronically ill or injured persons, then:

1. *[the]* The collaborating physician shall be present for sufficient periods of time, at least once every two (2) weeks, except in extraordinary circumstances that shall be documented, to participate in such review and to provide necessary medical direction, medical services, consultations, and supervision of the health care staff./;

2. *[In such settings the]* The use of a collaborative practice arrangement shall be limited to only an advanced practice nurse;

3. *[and the]* The physician shall not enter into a collaborative practice arrangement with more than three (3) full-time equivalent advanced practice nurses./; the number of full-time equivalent advanced practice nurses shall be reduced by the number of full-time equivalent physician assistants supervised pursuant to 20 CSR 2150-7.135(5); and

4. Exceptions may be made to the number of advanced practice nurses or physician assistants, upon application, which shall include a detailed statement of why the exception is necessary, the name and license number of every person who will participate in the excepted practice, the place of the excepted practice, and a detailed description, including proposed protocols and standing orders, that show how the excepted practice will protect the health of patients.

AUTHORITY: sections 334.104.3, RSMo Supp. [2002] 2005 and [334.125 and] 335.036, RSMo 2000. Original rule filed Jan. 29, 1996, effective Sept. 30, 1996. Amended: Filed April 1, 1998, effective Oct. 30, 1998. Amended: Filed Oct. 30, 2002, effective June 30, 2003. Amended: Filed Aug. 11, 2006.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri State Board of Healing Arts, Attn: Tina Steinman, Executive Director, 3605 Missouri Blvd., PO Box 4, Jefferson City, MO 65102 or healingarts@pr.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the Missouri Register. No public hearing is scheduled.

[Title 4—DEPARTMENT OF ECONOMIC DEVELOPMENT]

[Division 150—State Board of Registration for the Healing Arts]

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

Division 2150—State Board of Registration for the Healing Arts

Chapter 7—Licensing of Physician Assistants

PROPOSED AMENDMENT

[4 CSR 150-7.135] 20 CSR 2150-7.135 Physician Assistant Supervision Agreements. The board is amending section (5).

PURPOSE: This amendment limits the number of full-time professional employees a physician can supervise.

(5) No physician may be designated to serve as supervising physician for more than three (3) full-time equivalent licensed physician assistants; the number of full-time equivalent physician assistants shall be reduced by the number of full-time equivalent advanced practice nurses with whom the physician has entered into a collaborative practice agreement pursuant to 20 CSR 2150-5.100(4)(C). This limitation shall not apply to physician assistant supervision agreements of hospital employees providing in-/patient care services in hospitals as defined in Chapter 197, RSMo. Other exceptions may be made to the number of advanced practice nurses or physician assistants, upon application, which shall include a detailed statement of why the exception is necessary, the name and license number of every person who will participate in the excepted practice, the place of the excepted practice, and a detailed description, including proposed protocols and standing orders, that show how the excepted practice will protect the health of patients.

AUTHORITY: section 334.735, RSMo 2000. Original rule filed Jan. 3, 1997, effective July 30, 1997. For intervening history, please consult the Code of State Regulations. Amended: Filed Aug. 11, 2006.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri State Board of Healing Arts, Attn: Tina Steinman, Executive Director, 3605 Missouri Blvd., PO Box 4, Jefferson City, MO 65102 or healingarts@pr.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the *Missouri Register*. No public hearing is scheduled.

[Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT]

[Division 200—State Board of Nursing]

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL
INSTITUTIONS AND PROFESSIONAL
REGISTRATION

Division 2200—State Board of Nursing
Chapter 4—General Rules

PROPOSED AMENDMENT

[4 CSR 200-4.100] 20 CSR 2200-4.100 **Advanced Practice Nurse.** The board proposes to amend sections (2), (3) and (8).

PURPOSE: This rule is being amended to clarify certification/recertification and continuing education competency requirements.

(2) Eligibility Criteria for Nurses with Specialty Certification.

(A) Registered professional nurses who are certified registered nurse anesthetists, certified nurse midwives, certified nurse practitioners, or certified clinical nurse specialists applying for recognition from the Missouri State Board of Nursing for eligibility to practice as advanced practice nurses shall—

1. Hold current license to practice in Missouri as registered professional nurses; and
2. Be certified in their respective advanced practice nursing clinical specialty area by a nationally recognized certifying body, meeting the requirements of this rule; and
3. Submit documented evidence of satisfactory, active, up-to-date certification/recertification/maintenance and/or continuing education/competency *[status]* to the board.

(3) Eligibility Criteria for Nurses Without Specialty Certification.

(B) *[Registered professional nurses who are graduate registered nurse anesthetists, graduate nurse midwives, graduate nurse practitioners, or graduate clinical nurse specialists applying for recognition from the Missouri State Board of Nursing for eligibility to practice as advanced practice nurses shall—]* A person who has graduated from an advanced nursing education program may be recognized by the Missouri State Board of Nursing as a Graduate Advanced Practice Registered Nurse for up to four (4) months from the date of graduation, pending a certification decision by an acceptable nationally recognized certifying body, upon satisfactory proof that they:

1. Hold current license to practice in Missouri as registered professional nurses; and
2. Provide evidence of having successfully completed an advanced nursing education program as defined in subsection (1)(B); and
3. *[Be within period between graduation from advanced nursing education program and the receipt of results of the first available certification examination administered after graduation by a nationally recognized certifying body acceptable to the Missouri State Board of Nursing, followed by notification of results to the board within five (5) working days of receipt of results and, if notification is of unsuccessful certification examination results, then continued recognition and practice as an advanced practice nurse in Missouri is immediately terminated; and]* Have applied for cer-

tification with an acceptable nationally recognized certifying body;

4. *[Subsection (3)(B) applies only to graduate registered professional nurses for whom a board-accepted nationally recognized advanced practice nursing clinical specialty area certification examination exists or is available.]* Have never been denied certification, or had any certification suspended, revoked or cancelled, by an acceptable nationally recognized certifying body; and

5. They agree to:

A. Cease advanced practice nursing immediately upon notice that they have not successfully completed the certification process for any reason; and

B. Notify the board within five (5) working days of the receipt of the results of their certification application.

(C) Subsection (3)(B) applies only to graduate registered professional nurses for whom a board-accepted nationally recognized advanced practice nursing clinical specialty area certification examination exists or is available.

(8) Continued Recognition.

(C) Certified advanced practice nurses shall maintain active, up-to-date recertification status and continuing competency in advanced practice nursing clinical specialty area by actively participating and satisfactorily meeting recertification/maintenance terms and/or continuing education/competency requirements of their nationally recognized certifying body. It is the responsibility of certified advanced practice nurses to submit evidence to the board of active, satisfactory recertification and/or continuing education/competency *[status]* prior to expiration date to prevent removal of recognition as advanced practice nurses by the Missouri State Board of Nursing.

AUTHORITY: section 335.016(2), RSMo Supp. [2002] 2005 and 335.036, RSMo 2000. Original rule filed Nov. 15, 1991, effective March 9, 1992. For intervening history, please consult the *Code of State Regulations*. Amended: Filed Aug. 11, 2006.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the State Board of Nursing, Lori Scheidt, Executive Director, PO Box 656, Jefferson City, MO 65102, by fax at (573) 751-0075 or via email at nursing@pr.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the *Missouri Register*. No public hearing is scheduled.

[Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT]

[Division 200—State Board of Nursing]

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL
INSTITUTIONS AND PROFESSIONAL
REGISTRATION

Division 2200—State Board of Nursing
Chapter 4—General Rules

PROPOSED AMENDMENT

[4 CSR 200-4.200] 20 CSR 2200-4.200 **Collaborative Practice.** The board is proposing to amend paragraph (3)(I)4. and subsection (4)(C).

PURPOSE: *This amendment defines the number of full-time professionals that can be supervised by a physician in a collaborative practice arrangement.*

(3) Methods of Treatment.

(I) Methods of treatment delegated and authority to administer, dispense, or prescribe drugs shall be subject to the following:

1. The physician retains the responsibility for ensuring the appropriate administering, dispensing, prescribing and control of drugs utilized pursuant to a collaborative practice arrangement in accordance with all state and federal statutes, rules, or regulations;

2. All labeling requirements outlined in section 338.059, RSMo shall be followed;

3. Consumer product safety laws and Class B container standards shall be followed when packaging drugs for distribution;

4. All drugs shall be stored according to the *United States Pharmacopeia* (USP), published August 1, 2006, recommended conditions, which is incorporated by reference, **which can be obtained from USP, 12601 Twinbrook Parkway, Rockville, Maryland 20852-1790, USA, (800) 227-8772 or at <http://www.usp.org>. This rule does not incorporate any subsequent amendments or additions;**

5. Outdated drugs shall be separated from the active inventory;

6. Retrievable dispensing logs shall be maintained for all prescription drugs dispensed and shall include all information required by state and federal statutes, rules, or regulations;

7. All prescriptions shall conform to all applicable state and federal statutes, rules, or regulations and shall include the name, address, and telephone number of the collaborating physician and collaborating advanced practice nurse;

8. A registered professional nurse shall not, under any circumstances, prescribe drugs;

9. An advanced practice nurse shall not, under any circumstances, prescribe controlled substances. The administering or dispensing of a controlled substance by a registered professional nurse or advanced practice nurse in a collaborative practice arrangement shall be accomplished only under the direction and supervision of the collaborating physician, or other physician designated in the collaborative practice arrangement, and shall only occur on a case-by-case determination of the patient's needs following verbal consultation between the collaborating physician and collaborating registered professional nurse or advanced practice nurse. The required consultation and the physician's directions for the administering or dispensing of controlled substances shall be recorded in the patient's chart and in the appropriate dispensing log. These recordings shall be made by the collaborating registered professional nurse or advanced practice nurse and shall be co-signed by the collaborating physician following a review of the records;

10. An advanced practice nurse or registered professional nurse in a collaborative practice arrangement may only dispense starter doses of medication to cover a period of time for seventy-two (72) hours or less with the exception of Title X family planning providers or publicly funded clinics in community health settings that dispense medications free of charge. The dispensing of drug samples, as defined in 21 U.S.C. section 353(c)(1), is permitted as appropriate to complete drug therapy; and

11. The medications to be administered, dispensed, or prescribed by a collaborating registered professional nurse or advanced practice nurse in a collaborative practice arrangement shall be consistent with the education, training, competence, and scopes of practice of the collaborating physician and collaborating registered professional nurse or advanced practice nurse.

(4) Review of Services.

(C) If a collaborative practice arrangement is used in clinical situations where a collaborating advanced practice nurse provides health care services that include the diagnosis and initiation of treatment for acutely or chronically ill or injured persons, then:

1. *[the]* **The** collaborating physician shall be present for sufficient periods of time, at least once every two (2) weeks, except in extraordinary circumstances that shall be documented, to participate in such review and to provide necessary medical direction, medical services, consultations, and supervision of the health care staff./;

2. *[In such settings the]* **The** use of a collaborative practice arrangement shall be limited to only an advanced practice nurse;

3. *[and the]* **The** physician shall not enter into a collaborative practice arrangement with more than three (3) full-time equivalent advanced practice nurses./; **the number of full-time equivalent advanced practice nurses shall be reduced by the number of full-time equivalent physician assistants supervised pursuant to 20 CSR 2150-7.135(5).**

4. **Exceptions may be made to the number of advanced practice nurses or physician assistants, upon application, which shall include a detailed statement of why the exception is necessary, the name and license number of every person who will participate in the excepted practice, the place of the excepted practice, and a detailed description, including proposed protocols and standing orders, that show how the excepted practice will protect the health of patients.**

AUTHORITY: sections 334.104.3, RSMo Supp. [2002] 2005 and 335.036, RSMo 2000. Original rule filed Jan. 29, 1996, effective Sept. 30, 1996. Amended: Filed April 1, 1998, effective Oct. 30, 1998. Amended: Filed Oct. 30, 2002, effective June 30, 2003. Amended: Filed Aug. 11, 2006.

PUBLIC COST: *This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.*

PRIVATE COST: *This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.*

NOTICE TO SUBMIT COMMENTS: *Anyone may file a statement in support of or in opposition to this proposed amendment with the State Board of Nursing, Lori Scheidt, Executive Director, PO Box 656, Jefferson City, MO 65102, by fax at (573) 751-0075 or via email at nursing@pr.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the Missouri Register. No public hearing is scheduled.*

[Title 4—DEPARTMENT OF ECONOMIC DEVELOPMENT]

[Division 255—Missouri Board for Respiratory Care]

Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

Division 2255—Missouri Board for Respiratory Care

Chapter 1—General Rules

PROPOSED AMENDMENT

[4 CSR 255-1.040] **20 CSR 2255-1.040 Fees.** The board is proposing to amend section (1).

PURPOSE: *This amendment reflects the board's new requirement that applicants for licensure utilize the Missouri State Highway Patrol's approved vendor for both Missouri State Highway Patrol and Federal Bureau of Investigation fingerprint background checks. A fingerprint fee to the board is thus no longer necessary. Additionally, the penalty fee is being reduced to coincide with the penalty fees charged throughout the division.*

(1) The following fees are established by the Division of Professional Registration *[and are payable in the form of a cashier's check, personal check, or money order]*:

(G) Insufficient Funds Check Fee Charge [~~\$ 50.00~~] **\$25.00**
*[(H) Fingerprint Card Check—Amount Determined
by the Missouri State Highway Patrol]*
[(I)] (H) Biennial License Renewal Fee \$ 50.00
[(J)] (I) Late Renewal Penalty Fee \$100.00
[(K)] (J) Biennial Inactive License Renewal Fee \$ 30.00

AUTHORITY: sections [334.800,] 334.840.2 and 334.850, RSMo 2000 [and 334.870, 334.880, 334.890 and 610.026, RSMo Supp. 2005]. Emergency rule filed June 25, 1998, effective July 6, 1998, expired Feb. 25, 1999. Original rule filed June 25, 1998, effective Jan. 30, 1999. Amended: Filed Dec. 30, 1999, effective June 30, 2000. Amended: Filed March 14, 2001, effective Sept. 30, 2001. Amended: Filed July 29, 2005, effective March 30, 2006. Amended: Filed Aug. 11, 2006.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment is estimated to cost private entities an increase of approximately one hundred dollars (\$100) annually for the life of the rule. It is anticipated that the costs will recur for the life of the rule, may vary with inflation and are expected to increase at the rate projected by the Legislative Oversight Committee.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Board for Respiratory Care, Attention: Vanessa Beauchamp, PO Box 1335, Jefferson City, MO 65102, by facsimile to (573) 526-3489 or via email to rcp@pr.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

PRIVATE ENTITY FISCAL NOTE**I. RULE NUMBER****Title 4 -Department of Economic Development****Division 255 - Missouri Board of Respiratory Care****Chapter 1 - General Rules****Proposed Amendment - 4 CSR 255-1.040 Fees**

Prepared June 7, 2006 by the Division of Professional Registration

II. SUMMARY OF FISCAL IMPACT

Estimate the number of entities by class which would likely be affected by the adoption of the proposed amendment:	Classification by type of the business entities which would likely be affected:	Estimated biennial cost of compliance with the amendment by affected entities:
4	Applicants/Licensees (insufficient funds check fee charge - \$25 decrease)	\$100
Estimated Annual Savings with Compliance for the Life of the Rule		\$100

III. WORKSHEET

See table above.

IV. ASSUMPTION

1. The above figures were based on FY06 actuals and FY07 projections.
2. It is anticipated that the total cost will recur annually for the life of the rule, may vary with inflation and is expected to increase annually at the rate projected by the Legislative Oversight Committee.

*[Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT]*

*[Division 255—Missouri Board for Respiratory Care]
Title 20—DEPARTMENT OF INSURANCE, FINANCIAL
INSTITUTIONS AND PROFESSIONAL
REGISTRATION*

*Division 2255—Missouri Board for Respiratory Care
Chapter 2—Licensure Requirements*

PROPOSED AMENDMENT

*[4 CSR 255-2.010] 20 CSR 2255-2.010 Application for
Licensure.* The board is proposing to amend sections (1), (2) and
(5).

*PURPOSE: This amendment implements use of the Missouri State
Highway Patrol (MSHP) process for electronic submission of finger-
prints and payment of fingerprinting fees through an outside source
contracted by MSHP.*

(1) Application for licensure shall be submitted on the forms provid-
ed by the board and may be obtained *[by writing the board at
3605 Missouri Boulevard, P.O. Box 1335, Jefferson City, MO
65102 or by calling (573) 522-5864. The TDD number is
(800) 735-2966] from the board office.*

(2) An application is not considered officially filed with the board
until it has been determined by the board or division staff to be com-
plete and the application is submitted on the form provided by the
board, typewritten or printed in black ink, signed, notarized and
accompanied by application fee pursuant to rules promulgated by the
board, a full set of fingerprints, *[with the appropriate fee as
defined by the rules promulgated by the board]* and any other
applicable forms. All information should be received by the board
within ninety (90) days of the date of the application.

(5) *[The applicant shall submit a full set of fingerprints with
the appropriate fee pursuant to rules promulgated by the
board unless the applicant previously submitted fingerprints
for a temporary or educational permit issued by the board.]*
The applicant shall submit proof of submission of fingerprints to
the Missouri State Highway Patrol's approved vendor for both a
Missouri State Highway Patrol and Federal Bureau of
Investigation fingerprint background check unless the applicant
previously submitted fingerprints for a temporary or education-
al permit issued by the board. Proof shall consist of any docu-
mentation acceptable to the board. Any fees due for fingerprint
background checks shall be paid by the applicant directly to the
Missouri State Highway Patrol or its approved vendor. All fees
are nonrefundable.

*[(A) For the purpose of this rule, fingerprints shall be
obtained from a law enforcement agency or may be obtained
from the Missouri Board for Respiratory Care. Applicants
desiring fingerprinting by the board shall contact the board
at least twenty-four (24) hours in advance to schedule an
appointment during normal business hours.]*

*AUTHORITY: sections [334.800,] 334.840.2 and
334.850[(2),(4),(6)], RSMo 2000 and 334.870, RSMo Supp.
[2001] 2005. Emergency rule filed June 25, 1998, effective July 6,
1998, expired Feb. 25, 1999. Original rule filed June 25, 1998,
effective Jan. 30, 1999. Amended: Filed Nov. 15, 2001, effective June
30, 2002. Amended: Filed June 28, 2002, effective Jan. 30, 2003.
Amended: Filed Aug. 11, 2006.*

*PUBLIC COST: This proposed amendment will not cost state agen-
cies or political subdivisions more than five hundred dollars (\$500)
in the aggregate.*

*PRIVATE COST: This proposed amendment is estimated to cost pri-
vate entities an increase of approximately three thousand eight hun-
dred forty-six dollars (\$3,846) annually with a continuous annual
increase of seventy-seven dollars and seventy cents (\$77.70) for the
life of the rule. It is anticipated that the costs will recur for the life
of the rule, may vary with inflation and are expected to increase at
the rate projected by the Legislative Oversight Committee.*

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in
support of or in opposition to this proposed amendment with the
Missouri Board for Respiratory Care, Attention: Vanessa
Beauchamp, PO Box 1335, Jefferson City, MO 65102, by facsimile
to (573) 526-3489 or via email to rcp@pr.mo.gov. To be considered,
comments must be received within thirty (30) days after publication
of this notice in the **Missouri Register**. No public hearing is sched-
uled.*

PRIVATE ENTITY FISCAL NOTE**I. RULE NUMBER****Title 4 -Department of Economic Development****Division 255 - Missouri Board of Respiratory Care****Chapter 2 - Licensure Requirements****Proposed Amendment - 4 CSR 255-2.010 Application for Licensure**

Prepared June 7, 2006 by the Division of Professional Registration

II. SUMMARY OF FISCAL IMPACT

Estimate the number of entities by class which would likely be affected by the adoption of the proposed amendment:	Classification by type of the business entities which would likely be affected:	Estimated biennial cost of compliance with the amendment by affected entities:
297	Applicants (fingerprinting fees - \$12.95 increase)	\$3,846
Estimated Annual Cost of Compliance for the Life of the Rule		\$3,846 with a continuous annual increase of \$77.70

III. WORKSHEET

See table above.

IV. ASSUMPTION

1. In FY05 the board received 297 applications for licensure. Currently applicants pay a \$38.00 fingerprinting fee. The new fee will be \$50.95, therefore, applicants will incur an increase of \$12.95 annually for the life of the rule.
2. The board anticipates a 2% increase in the number of applicants affected by this amendment annually. Therefore, applicants will see an continual annual increase of approximately \$77.70.
3. The fingerprinting processing fee is a pass through fee that does not effect the board's fund.
4. It is anticipated that the total cost will recur annually for the life of the rule, may vary with inflation and is expected to increase annually at the rate projected by the Legislative Oversight Committee.

*[Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT]*

*[Division 255—Missouri Board for Respiratory Care]
Title 20—DEPARTMENT OF INSURANCE, FINANCIAL
INSTITUTIONS AND PROFESSIONAL
REGISTRATION*

*Division 2255—Missouri Board for Respiratory Care
Chapter 2—Licensure Requirements*

PROPOSED AMENDMENT

[4 CSR 255-2.020] 20 CSR 2255-2.020 Application for Temporary Permit. The board is proposing to amend sections (1), (2) and (5).

PURPOSE: This amendment requires applicants for licensure to utilize the Missouri State Highway Patrol's approved vendor for both a Missouri State Highway Patrol and Federal Bureau of Investigation fingerprint background check.

(1) Application for a temporary permit shall be submitted on the forms provided by the board and may be obtained *[by writing the board at 3605 Missouri Boulevard, P.O. Box 1335, Jefferson City, MO 65102 or by calling (573) 522-5864. The TDD number is (800) 735-2966] from the board office.*

(2) An application for a temporary permit is not considered officially filed with the board until it has been determined by the board or division staff to be complete and the application is submitted on the form provided by the board, typewritten or printed in black ink, signed, notarized and accompanied by the application fee for temporary permit and a full set of fingerprints *[with the appropriate fee]*. All information should be received by the board within ninety (90) days of application.

(5) *[The applicant shall submit a full set of fingerprints on the form provided by the board with the appropriate fee pursuant to rules promulgated by the board.] The applicant shall submit proof of submission of fingerprints to the Missouri State Highway Patrol's approved vendor for both a Missouri State Highway Patrol and Federal Bureau of Investigation fingerprint background check. Proof shall consist of any documentation acceptable to the board. Any fees due for fingerprint background checks shall be paid by the applicant directly to the Missouri State Highway Patrol or its approved vendor. All fees are nonrefundable.*

[(A) For the purpose of this rule, fingerprints shall be obtained from a law enforcement agency or may be obtained from the Missouri Board for Respiratory Care. Applicants desiring fingerprinting by the board shall contact the board at least twenty-four (24) hours in advance to schedule an appointment during normal business hours.]

AUTHORITY: sections [334.800,] 334.840.2 and 334.850, RSMo 2000 and 334.890[.2 and 3], RSMo Supp. [2001] 2005. Emergency rule filed June 25, 1998, effective July 6, 1998, expired Feb. 25, 1999. Original rule filed June 25, 1998, effective Jan. 30, 1999. Amended: Filed Jan. 31, 2001, effective Aug. 30, 2001. Amended: Filed Nov. 15, 2001, effective June 30, 2002. Amended: Filed Aug. 11, 2006.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment is estimated to cost private entities an increase of approximately one thousand four hundred sixty-three dollars (\$1,463) annually with a continuous annual

increase of twenty-five dollars and ninety cents (\$25.90) for the life of the rule. It is anticipated that the costs will recur for the life of the rule, may vary with inflation and are expected to increase at the rate projected by the Legislative Oversight Committee.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Board for Respiratory Care, Attention: Vanessa Beauchamp, PO Box 1335, Jefferson City, MO 65102, by facsimile to (573) 526-3489 or via email to rcp@pr.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

PRIVATE ENTITY FISCAL NOTE**I. RULE NUMBER****Title 4 -Department of Economic Development****Division 255 - Missouri Board of Respiratory Care****Chapter 2 - Licensure Requirements****Proposed Amendment - 4 CSR 255-2.020 Application for Temporary Permit**

Prepared June 7, 2006 by the Division of Professional Registration

II. SUMMARY OF FISCAL IMPACT

Estimate the number of entities by class which would likely be affected by the adoption of the proposed amendment:	Classification by type of the business entities which would likely be affected:	Estimated biennial cost of compliance with the amendment by affected entities:
113	Applicants (fingerprinting fees - \$12.95 increase)	\$1,463
Estimated Annual Cost of Compliance for the Life of the Rule		\$1,463 with a continuous annual increase of \$25.90

III. WORKSHEET

See table above.

IV. ASSUMPTION

1. In FY05 the board received 113 applications for educational permits. Currently applicants pay a \$38.00 fingerprinting fee. The new fee will be \$50.95, therefore, applicants will incur an increase of \$12.95 annually for the life of the rule.
2. The board anticipates a 2% increase in the number of applicants affected by this amendment annually. Therefore, applicants will see an continual annual increase of approximately \$25.90.
3. The fingerprinting processing fee is a pass through fee that does not effect the board's fund.
4. It is anticipated that the total cost will recur annually for the life of the rule, may vary with inflation and is expected to increase annually at the rate projected by the Legislative Oversight Committee.

*[Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT]*

*[Division 255—Missouri Board for Respiratory Care]
Title 20—DEPARTMENT OF INSURANCE, FINANCIAL
INSTITUTIONS AND PROFESSIONAL
REGISTRATION*

*Division 2255—Missouri Board for Respiratory Care
Chapter 2—Licensure Requirements*

PROPOSED AMENDMENT

[4 CSR 255-2.030] 20 CSR 2255-2.030 Application for an Educational Permit. The board is proposing to amend sections (1), (2) and (5).

PURPOSE: This amendment requires applicants for licensure to utilize the Missouri State Highway Patrol's approved vendor for both a Missouri State Highway Patrol and Federal Bureau of Investigation fingerprint background check.

(1) A student enrolled in an accredited respiratory care educational program who seeks to provide respiratory care services outside the educational program must apply to the board for an educational permit. Application for an educational permit shall be submitted on the forms provided by the board and may be obtained *[by writing]* from the board office. *[at 3605 Missouri Boulevard, PO Box 1335, Jefferson City, MO 65102 or by calling (573) 522-5864. The TDD number is (800) 735-2966.]*

(2) An application for an educational permit is not considered officially filed with the board until it has been determined by the board or division staff to be complete and the application is submitted on the form provided by the board, typewritten or printed in black ink, signed, notarized, accompanied by the application fee for an educational permit and a full set of fingerprints *[with the appropriate fee]*.

(5) *[The applicant shall submit a full set of fingerprints on the form provided by the board and the appropriate fee pursuant to rules promulgated by the board.]* The applicant shall submit proof of submission of fingerprints to the Missouri State Highway Patrol's approved vendor for both a Missouri State Highway Patrol and Federal Bureau of Investigation fingerprint background check. Proof shall consist of any documentation acceptable to the board. Any fees due for fingerprint background checks shall be paid by the applicant directly to the Missouri State Highway Patrol or its approved vendor. All fees are nonrefundable.

[(A) For the purpose of this rule, fingerprints shall be obtained from a law enforcement agency or may be obtained from the Missouri Board for Respiratory Care. Applicants desiring fingerprinting by the board shall contact the board at least twenty-four (24) hours in advance to schedule an appointment during normal business hours.]

AUTHORITY: sections *[334.800,] 334.840.2[,]* and 334.850, RSMo 2000 and 334.890, *[.1 and 334.890.3,]* RSMo Supp. *[2001] 2005.* Emergency rule filed June 25, 1998, effective July 6, 1998, expired Feb. 25, 1999. Original rule filed June 25, 1998, effective Jan. 30, 1999. Amended: Filed Jan. 31, 2001, effective Aug. 30, 2001. Amended: Filed Nov. 15, 2001, effective June 30, 2002. Amended: Filed Aug. 11, 2006.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment is estimated to cost private entities an increase of approximately two hundred forty-six dollars (\$246) annually with a continuous increase of twelve dollars and ninety-five cents (\$12.95) for the life of the rule. It is anticipated that the costs will recur for the life of the rule, may vary with inflation and are expected to increase at the rate projected by the Legislative Oversight Committee.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Board for Respiratory Care, Attention: Vanessa Beauchamp, PO Box 1335, Jefferson City, MO 65102, by facsimile to (573) 526-3489 or via email to rcp@pr.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.

PRIVATE ENTITY FISCAL NOTE**I. RULE NUMBER****Title 4 -Department of Economic Development****Division 255 - Missouri Board of Respiratory Care****Chapter 2 - Licensure Requirements****Proposed Amendment - 4 CSR 255-2.030 Application for an Educational Permit**

Prepared June 7, 2006 by the Division of Professional Registration

II. SUMMARY OF FISCAL IMPACT

Estimate the number of entities by class which would likely be affected by the adoption of the proposed amendment:	Classification by type of the business entities which would likely be affected:	Estimated biennial cost of compliance with the amendment by affected entities:
19	Applicants (fingerprinting fees - \$12.95 increase)	\$246
Estimated Annual Cost of Compliance for the Life of the Rule		\$246 with a continuous annual increase of \$12.95

III. WORKSHEET

See table above.

IV. ASSUMPTION

1. In FY05 the board received 19 applications for temporary permits. Currently applicants pay a \$38.00 fingerprinting fee. The new fee will be \$50.95, therefore, applicants will incur an increase of \$12.95 annually for the life of the rule.
2. The board anticipates a 2% increase in the number of applicants affected by this amendment annually. Therefore, applicants will see an continual annual increase of approximately \$12.95.
3. The fingerprinting processing fee is a pass through fee that does not effect the board's fund.
4. It is anticipated that the total cost will recur annually for the life of the rule, may vary with inflation and is expected to increase annually at the rate projected by the Legislative Oversight Committee.

[Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT]

[Division 255—Missouri Board for Respiratory Care]
Title 20—DEPARTMENT OF INSURANCE, FINANCIAL
INSTITUTIONS AND PROFESSIONAL
REGISTRATION

Division 2255—Missouri Board for Respiratory Care
Chapter 2—Licensure Requirements

PROPOSED AMENDMENT

[4 CSR 255-4.010] 20 CSR 2255-4.010 Continuing Education Requirements. The board is proposing to amend sections (2), (5), (6), (8) and (9), add a new section (6) and renumber the remaining sections.

PURPOSE: This amendment allows for general clean up of the text of the rule, provides additional information required for continuing education program approval and specifies the types of continuing education certificates allowed by the board as proof of continuing education.

(2) For the license renewal due on August 1, 2002, and each subsequent renewal thereafter, the licensee shall certify, **on the renewal form provided by the board**, that s/he has obtained at least twenty-four (24) hours of continuing education during the continuing education reporting period preceding the license renewal *[on the renewal form provided by the board]*. The renewal form shall be *[mailed directly]* **submitted** to the board office on or before the expiration date. The renewal form shall not be considered complete until all of the required information has been received by the board. The licensee shall not submit the record of continuing education attendance to the board except in the case of a board audit.

(5) If a group or individual wants to sponsor a continuing education program relating to respiratory care that is not approved by the AARC or its state affiliates, a request shall be submitted to the board's executive director not fewer than ten (10) business days prior to the offering of the continuing education program. Once all information pertaining to the request has been received in the board office, the board shall review the request and then notify the sponsor whether approval will be granted. The board will not consider requests for approval of any program submitted after it has already been presented.

[(A) Requests for approval of continuing education shall be submitted on a form provided by the board and shall include:

- 1. The type of educational activity;*
- 2. The subject matter of the activity with objectives and goals;*
- 3. The number of continuing education hours offered;*
- 4. The names and qualifications of the instructors; and*
- 5. The location, date and time of the activity.*

[(B) Once an application for approval has been granted by the board, reapproval shall not be required for each subsequent presentation of the educational activity so long as the educational activity has not changed. If any portion of the activity has changed, reapplication must be made.

[(C) Appeal Process. If a course is denied or is accredited for less hours than were requested, the applicant may file an appeal, provided that the application was originally received sixty (60) days prior to the date of the program. The appeal must be in written form and must provide detailed justification to support the applicant's appeal. The chairperson for the board will review the appeal and all accompanying documentation. If the chairperson concurs with the original decision, the appeal is considered complete and the original decision will be upheld. If there is a difference between the members' decisions, the course will be reviewed by the full board at the next scheduled meeting.

[(D) Courses received less than sixty (60) days prior to the program date will not be eligible for appeal.

[(E) No more than twelve (12) hours will be awarded over a two (2)-year period for Advanced Cardiac Life Support (ACLS), Neonatal Advanced Life Support (NALS)/Neonatal Resuscitation Program (NRP), or Pediatric Advanced Life Support (PALS). No credit shall be awarded for Basic Cardiac Life Support (BCLS) or Cardiopulmonary Resuscitation (CPR). This exception will override AARC approval.]

(6) Courses received less than sixty (60) days prior to the program date will not be eligible for appeal. If a course is denied or is accredited for fewer hours than were requested, the applicant may file an appeal, provided that the application was originally received sixty (60) days prior to the date of the program. The appeal must be in written form and must provide a detailed justification to support the applicant's appeal. The chairperson for the board will review the appeal and all accompanying documentation. If the chairperson concurs with the original decision, the appeal is considered complete and the original decision will be upheld. If there is a difference between the members' decisions, the course will be reviewed by the full board at the next scheduled meeting.

(A) Requests for approval of continuing education shall be submitted on a form provided by the board and shall include:

1. The type of educational activity;
2. The subject matter of the activity with an explanation of how each program offered is relevant to the practice of respiratory care;
3. The proposed number of continuing education hours offered;
4. The names and qualifications of the instructors;
5. The location, date and time of the activity;
6. A copy of the program agenda; and
7. The number of expected participants.

(B) Once an application for approval has been granted by the board reapproval shall not be required for each subsequent presentation given within three (3) years of approval. An application for reapproval shall be submitted if any portion of the activity has changed or if it has been longer than three (3) years since initial approval.

(C) Six (6) hours will be awarded for the successful completion of a course (excluding preparatory courses) related to Advanced Cardiac Life Support (ACLS), Neonatal Advanced Life Support (NALS)/Neonatal Resuscitation Program (NRP) or Pediatric Advanced Life Support (PALS). Programs identified within this subsection will not require pre-approval by the AARC, its state affiliates or the board for acceptance as hours towards fulfilling the continuing education requirement. However, not more than a total of twelve (12) hours will be awarded for any combination of the above mentioned programs during a two (2)-year period.

(D) No credit shall be awarded for courses or preparatory courses related to Basic Cardiac Life Support (BCLS) or Cardiopulmonary Resuscitation (CPR). This exception will override AARC approval.

[[6]] (7) Continuing education hours shall not be awarded for regular work activities (including orientation), administrative staff meetings, case staffing or reporting, membership in or holding office in, or participation on boards or committees, business meetings of professional organizations, or training specifically related to policies and procedures of an agency. Exceptions to this rule are in-service training programs approved by the board.

[[7]] (8) A licensee shall be responsible for maintaining his/her records of continuing education activities. Each licensee shall maintain for a period of not less than the preceding two (2) continuing education reporting periods prior to renewal, documentation verifying completion of the appropriate number of continuing education hours for each renewal period.

[(8)] (9) Upon request of the board, the licensee shall provide all documentation of completion of continuing educational activities. Documentation of the continuing education may consist of—

(A) Certificates or affidavits provided by the program;

[(B)] Receipts for fees paid to the sponsor;

[(C)] (B) American Association for Respiratory Care or its successor organization(s) report of continuing education credits;

[(D)] (C) Educational transcripts from an accredited respiratory care educational program; or

[(E)] (D) A letter from the board showing approval of the continuing education hours and documentation of attendance at said program.

[(9)] (10) Any licensee seeking renewal of a license or certificate without having fully complied with these continuing education requirements who wishes to seek a waiver of the requirements shall file with the board a renewal application, a statement setting forth the facts concerning the noncompliance, a request for waiver of the continuing education requirements on the basis of such facts and, if desired, a request for an interview before the board. If the board finds from the statement or any other evidence submitted, that good cause has been shown for waiving the continuing education requirements, or any part thereof, the board shall waive part or all of the requirements for the renewal period for which the licensee has applied. At that time, the licensee will be requested to submit the required renewal fee.

(A) Good cause shall be defined as an inability to devote sufficient hours to fulfilling the continuing education requirements during the applicable renewal period based on one of the following reasons:

1. Full-time service in the armed forces of the United States during a substantial part of the renewal period; or

2. An incapacitating illness; or,

[3. Undue hardship.]

(B) If an interview before the board is requested at the time the request for waiver is filed, the licensee shall be given at least twenty (20) days written notice of the date, time and place of the interview.

[(10)] (11) Violation of any provision of this rule shall be deemed by the board to constitute misconduct, fraud, misrepresentation, dishonesty, unethical conduct or unprofessional conduct in the performance of the functions or duties of a respiratory care practitioner depending on the licensee's conduct. In addition, a licensee who fails to complete and report in a timely fashion the required twenty-four (24) hours of continuing education and engages in the practice of respiratory care without the expressed written consent of the board shall be deemed to have engaged in the unauthorized practice of respiratory care.

AUTHORITY: sections [334.800,] 334.840.2[,] and 334.850, [334.910 and 334.920,] RSMo 2000 and 334.880, RSMo Supp. [2001] 2005. Original rule filed June 25, 1998, effective Jan. 30, 1999. Amended: Filed Dec. 30, 1999, effective June 30, 2000. Amended: Filed June 2, 2000, effective Dec. 30, 2000. Rescinded and readopted: Filed Jan. 31, 2001, effective Aug. 30, 2001. Amended: Filed June 28, 2002, effective Jan. 30, 2003. Amended: Filed Aug. 11, 2006.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Board for Respiratory Care, Attention: Vanessa

Beauchamp, PO Box 1335, Jefferson City, MO 65102, by facsimile to (573) 526-3489 or via email to rcp@pr.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the *Missouri Register*. No public hearing is scheduled.

[Title 4—DEPARTMENT OF ECONOMIC DEVELOPMENT]

[Division 263—State Committee for Social Workers] Title 20—DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

Division 2263—State Committee for Social Workers Chapter 1—General Rules

PROPOSED AMENDMENT

[4 CSR 263-1.035] 20 CSR 2263-1.035 Fees. The committee proposes to amend subsections (1)(A), (C)–(E) and (G).

PURPOSE: This rule is being amended to adjust various fees for both clinical and baccalaureate social workers.

(1) The following fees are established by the committee and are payable in the form of a cashier's check, personal check or money order:

(A) Application/Initial License Fee	
1. October–January (two (2)-year license)	[\$ 130.00] \$117.00
2. February–May (one and one-half (1 1/2)-year license)	[\$ 98.00] \$88.00
3. June–September (one (1)-year license)	[\$ 65.00] \$58.00
(C) Two (2)-Year License Renewal Fee	[\$ 65.00] \$58.00
(D) Delinquent Fee for Failure to Obtain a License or Timely Renew a License	[\$ 65.00] \$58.00
(E) Restoration of Lapsed License Fee	[\$ 130.00] \$117.00
(G) Reciprocity Application Fee	[\$ 146.00] \$131.00

AUTHORITY: sections 337.612 and 337.677, RSMo Supp. [2003] 2005 and 337.627, RSMo 2000. Original rule filed Jan. 20, 1999, effective July 30, 1999. Amended: Filed Oct. 30, 2002, effective June 30, 2003. Amended: Filed March 15, 2004, effective Sept. 30, 2004. Amended: Filed Aug. 11, 2006.

PUBLIC COST: This proposed amendment will cost state agencies and political subdivisions approximately eighteen thousand six hundred fifty-six dollars (\$18,656) in lost revenue biennially for the life of the rule. It is anticipated that the loss of revenue will recur for the life of the rule, may vary with inflation and is expected to increase at the rate projected by the Legislative Oversight Committee.

PRIVATE COST: This proposed amendment will save private entities an estimated eighteen thousand six hundred fifty-six dollars (\$18,656) in lost revenue biennially for the life of the rule. It is anticipated that the savings will recur for the life of the rule, may vary with inflation and are expected to decrease at the rate projected by the Legislative Oversight Committee.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the State Committee for Social Workers, Attention: Vanessa Beauchamp, PO Box 1335, Jefferson City, MO 65102, by faxing (573) 526-3489 or via email at lcs@pr.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the *Missouri Register*. No public hearing is scheduled.

PUBLIC ENTITY FISCAL NOTE

I. RULE NUMBER

Title 4 -Department of Economic Development

Division 263 - State Committee for Social Workers

Chapter 1 - General Rules

Proposed Amendment - 4 CSR 263-1.035 Fees

Prepared June 7, 2006 by the Division of Professional Registration

II. SUMMARY OF FISCAL IMPACT

Affected Agency or Political Subdivision	Estimated Loss of Revenue
State Committee for Social Workers	\$18,656.00

Total Loss of Revenue
Biennially for the Life of the Rule **\$18,656.00**

III. WORKSHEET

See private entity fiscal note.

IV. ASSUMPTION

1. The State Committee of Social Workers is statutorily obligated to enforce and administer the provisions of sections 337.600-337.642, RSMo. Pursuant to section 337.612, RSMo fees are set so that the revenue produced is sufficient, but not excessive, to cover the cost and expense to the committee for administering the provisions of sections 337.600-337.642, RSMo. Therefore, the committee is reducing the fees associated with licensure.

PRIVATE ENTITY FISCAL NOTE

I. RULE NUMBER

Title 4 -Department of Economic Development

Division 263 - State Committee for Social Workers

Chapter 1 - General Rules

Proposed Amendment - 4 CSR 263-1.035 Fees

Prepared June 7, 2006 by the Division of Professional Registration

II. SUMMARY OF FISCAL IMPACT

Estimate the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by type of the business entities which would likely be affected:	Estimated cost savings with compliance of the rule by affected entities:
52	Application/Initial License Fee 2 year license (decrease of \$13.00)	\$676
57	Application/Initial License Fee 1 1/2 year license (decrease of \$10.00)	\$570
81	Application/Initial License Fee 1 year license (decrease of \$10.00)	\$810
2100	Biennial Renewal Fee (decrease of \$7.00)	\$14,700
110	Delinquent Fee (decrease of \$7.00)	\$770
5	Restoration of a Lapsed License (decrease of \$13.00)	\$65
71	Reciprocity Application Fee (decrease of \$15.00)	\$1,065

**Estimated Biennial
Savings for the
Life of the Rule**

\$18,656

III. WORKSHEET

See table above.

IV. ASSUMPTION

1. The above estimates were based on FY05 actuals and FY06 projections.
2. It is anticipated that the total cost will recur annually for the life of the rule, may vary with inflation and is expected to increase annually at the rate projected by the Legislative Oversight Committee

*[Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT]*

[Division 263—State Committee for Social Workers]

**Title 20—DEPARTMENT OF INSURANCE, FINANCIAL
INSTITUTIONS AND PROFESSIONAL
REGISTRATION**

Division 2263—State Committee for Social Workers

Chapter 2—Licensure Requirements

PROPOSED AMENDMENT

[4 CSR 263-2.090] 20 CSR 2263-2.090 Inactive Status. The board is proposing to amend subsection (5)(B) and sections (6) and (7).

PURPOSE: This amendment establishes the examination inactive licensees will be required to take to reactivate their license.

(5) If an inactive licensee wishes to return a license to active status the licensee shall complete a Licensed Clinical or Baccalaureate Social Worker renewal form and pay the renewal fee as stated in the rules promulgated by the committee. In addition the licensee shall:

(B) Successfully complete *[an examination approved by the committee prior to reactivation of their license]* **the examination required for licensure as referenced to in 20 CSR 2263-2.050(3)(D) for clinical social workers or 20 CSR 2263-2.052(3)(D) for baccalaureate social workers.**

(6) In addition to the requirements set forth in section (5) above, a licensee whose license is inactive for five (5) years or more and has not completed sixty (60) hours of continuing education within five (5) years shall be required to successfully complete *[an examination approved by the committee prior to reactivation of their license]* **the examination required for licensure as referenced to in 20 CSR 2263-2.050(3)(D) for clinical social workers or 20 CSR 2263-2.052(3)(D) for baccalaureate social workers.**

(7) The inactive license fee is established in *[4 CSR 263] 20 CSR 2263-1.035.*

AUTHORITY: sections 337.600 and 337.677, RSMo Supp. [2003] 2005 and 620.150, RSMo 2000. Original rule filed March 15, 2004, effective Sept. 30, 2004. Amended: Filed Aug. 11, 2006.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will save private entities an estimated one hundred seventy-five dollars (\$175) biennially for the life of the rule. It is anticipated that the savings will recur for the life of the rule, may vary with inflation and are expected to decrease at the rate projected by the Legislative Oversight Committee.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Vanessa Beauchamp, Executive Director, State Committee for Social Workers, PO Box 1335, Jefferson City, MO 65102, by facsimile at (573) 526-3489, or via email at lcswh@mail.state.mo.us. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

PRIVATE ENTITY FISCAL NOTE**I. RULE NUMBER****Title 4 -Department of Economic Development****Division 263 - State Committee for Social Workers****Chapter 2 - Licensure Requirements****Proposed Amendment - 4 CSR 263-2.090 Inactive Status**

Prepared June 7, 2006 by the Division of Professional Registration

II. SUMMARY OF FISCAL IMPACT

Estimate the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by type of the business entities which would likely be affected:	Estimated cost savings with compliance of the rule by affected entities:
1	Inactive Licensees (ASWB examination - \$175)	\$175

**Estimated Annual Cost
for the Life of the Rule
Beginning in FY08****\$175****III. WORKSHEET**

See table above.

IV. ASSUMPTION

1. The above estimates were based on FY07 projections.
- 2 It is anticipated that the total cost will recur annually for the life of the rule, may vary with inflation and is expected to increase annually at the rate projected by the Legislative Oversight Committee

*[Title 4—DEPARTMENT OF ECONOMIC
DEVELOPMENT]*

*[Division 270—Missouri Veterinary Medical Board]
Title 20—DEPARTMENT OF INSURANCE, FINANCIAL
INSTITUTIONS AND PROFESSIONAL
REGISTRATION*

*Division 2270—Missouri Veterinary Medical Board
Chapter 1—General Rules*

PROPOSED AMENDMENT

[4 CSR 270-1.050] 20 CSR 2270-1.050 Renewal Procedures.
The board is proposing to amend subsection (3)(B).

PURPOSE: This rule is being amended to allow renewal of a non-current registration within two (2) years of the registration renewal date.

(3) Restoration of a Noncurrent License/Certificate of Registration.

(B) Any veterinary technician whose registration has been declared noncurrent under section 340.320.2, RSMo and who wishes to restore the certificate of registration shall make application to the board by submitting the following within *[one (1)] two (2)* years of the registration renewal date:

1. An application for renewal of registration;
2. The current renewal fee and all delinquent renewal fees as set forth in *[4 CSR 270/20 CSR 2270-1.021]*;
3. The penalty fee as set forth in *[4 CSR 270/20 CSR 2270-1.021]*;
4. Certification of completion of the required number of approved continuing education credits in accordance with *[4 CSR 270/20 CSR 2270-4.050]*; and
5. Verification of employment under the supervision of a licensed veterinarian.

AUTHORITY: sections 340.210, 340.258, 340.314, 340.322, 340.324 and 340.326, RSMo 2000 and 340.262, 340.312 and 340.320, RSMo Supp. 2005. Original rule filed Nov. 4, 1992, effective July 8, 1993. For intervening history, please consult the Code of State Regulations. Amended: Filed Aug. 11, 2006.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Missouri Veterinary Medical Board, Attention: Dana Hoelscher, PO Box 633, Jefferson City, MO 65102, via fax at (573) 526-3856 or via email at vets@pr.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the Missouri Register. No public hearing is scheduled.

**Title 5—DEPARTMENT OF ELEMENTARY
AND SECONDARY EDUCATION**

**Division 30—Division of Administrative and
Financial Services**

Chapter 345—Missouri School Improvement Program

PROPOSED RESCISSION

5 CSR 30-345.010 General Provisions. This rule implemented a program of comprehensive assessments of school districts' educational resources, instructional processes and educational outcomes

designed to stimulate and encourage improvement in the efficiency and effectiveness of instruction, and provided information which enabled the State Board of Education to accredit and classify the districts as required by section 161.092, RSMo.

PURPOSE: This rule is rescinded due to the adoption of rule 5 CSR 50-345.100.

AUTHORITY: section 161.092, RSMo 1994. This rule was previously filed as 5 CSR 50-345.010. Original rule filed July 16, 1990, effective Dec. 31, 1990. For intervening history, please consult the Code of State Regulations. Rescinded: Filed Aug. 3, 2006.

PUBLIC COST: This proposed rescission will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed rescission will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed rescission with the Department of Elementary and Secondary Education, Attn: Becky Kemna, Coordinator, School Improvement and Accreditation, PO Box 480, Jefferson City, MO 65102-0480. To be considered, comments must be received within thirty (30) days after publication of this notice in the Missouri Register. No public hearing is scheduled.

**Title 8—DEPARTMENT OF LABOR AND
INDUSTRIAL RELATIONS
Division 50—Division of Workers' Compensation
Chapter 2—Procedure**

PROPOSED AMENDMENT

8 CSR 50-2.030 Resolution of Medical Fee Disputes. The division proposes to amend the Purpose and sections (1) and (2) and add new sections (5) and (6).

PURPOSE: This amendment clarifies the procedures that are available to health care providers, employers and insurers to resolve medical fee disputes concerning charges for health care services as set forth in section 287.140, RSMo et seq. This amendment also establishes a procedure that applies if the total amount of reimbursement sought in a reasonableness dispute is one thousand dollars (\$1,000) or less. This amendment also sets forth the procedure that applies where the employer or insurer may file a request for an award on undisputed facts in regard to the application for direct payment on the sole ground that the health care services for which direct payment is being sought were not authorized by employer or insurer. This amendment also clarifies the confidentiality of the records and how the parties may request records from the division.

PURPOSE: This rule sets forth the Division of Workers' Compensation administrative procedures available to employers, insurance carriers and health care providers to resolve disputes concerning charges for health care services, in accordance with section 287.140, RSMo.

(1) Procedures *[p]* Pertaining to *[a]* Applications for *[p]* Payment of *[a]* Additional *[r]* Reimbursements (**Reasonableness Disputes**).

(A) If an employer or insurer disputes the reasonableness of a medical fee or charge, the employer or insurer shall notify the health care provider in writing that the medical charge is being disputed and shall explain the basis for the dispute. The employer or insurer may tender partial payment and the health care provider may accept payment of the amount tendered without prejudice to the filing of an

application for payment of additional reimbursements of medical fees. Upon receiving the written notice of the dispute, the health care provider *[shall]* **may** contact the insurer or employer to attempt to resolve the dispute. *[If the negotiation is unsuccessful and more than ninety (90) days have elapsed since the date of first billing, the health care provider may file an application for payment of additional reimbursement of medical fees with the division.]*

(B) In order to initiate a reasonableness dispute case, the health care provider must submit a Request for Case Status Information on a division-approved form to the division prior to the filing of an application for payment of additional reimbursement of medical fees. The health care provider shall file with the division an original application for payment of additional reimbursements of medical fees. The application shall contain the following information:

1. The name, address and telephone number of the health care provider *[and, if different, the address where the service was rendered];*
2. Name, address and telephone number of the employer and insurer against whom the application is being filed;
3. Name, address and Social Security number of the employee for whom health care services were rendered, together with the date of injury **and date the services were provided**, for all disputes;
4. The amount in dispute;
5. Any information the division deems necessary to resolve the dispute.

(C) The health care provider shall serve through personal service or by certified mail, return receipt requested, a copy of the application on the person or corporation against whom the application has been filed. The health care provider shall file proof of service with the division. **The division shall send by first-class mail a copy of the application to the employee, employer, insurer or third-party administrator or their attorneys of record as the case may be.**

(G) After the filing of an application for payment of additional reimbursement of medical fees, the parties *[shall again]* **may** attempt to resolve their dispute without the assistance of the division.

(H) If the total amount of the additional reimbursement sought is one thousand dollars (\$1,000) or less, and the parties are unable to resolve their dispute *[after sixty (60) days have lapsed since the filing of the application for payment of additional reimbursement of medical fees]*, either party may file a written request for administrative ruling which request initiates the administrative ruling procedure. All parties shall participate in the administrative ruling procedure.

1. Within ten (10) days of the receipt of the request for administrative ruling, the division director shall assign the matter to the dispute management unit for an informal summary review. The dispute management unit may require the health care provider to provide information in support of its application for payment of additional reimbursement of medical fees, such information to include, but is by no means limited to, the following:

- A. Complete certified copies of itemized billing statements;
- B. Complete certified copies of medical records corresponding to the itemized billing statements;
- C. Affidavit from the health care provider or from health care provider's counsel stating the basis for health care provider's belief that all the medical charges are fair and reasonable and otherwise in compliance with Chapter 287, RSMo;
- D. Copy of any contracts or agreements between health care provider and employer or insurer.

2. The dispute management unit may require the employer and/or insurer to provide information in defense of the application for payment of additional reimbursement of medical fees, such information to include, but is by no means limited to, an affidavit from the employer or insurer, or counsel, stating the basis for employer/insurer's belief that the medical charges are

not fair or reasonable, or otherwise not in compliance with Chapter 287, RSMo.

3. No discovery shall be allowed.

4. Within ten (10) days of completion of its informal summary review, the dispute management unit shall make a recommendation to the division director. Within ten (10) days of the receipt of the dispute management unit's recommendation, the division director shall issue an administrative ruling in the case awarding additional reimbursement to the health care provider in an amount certain or denying additional reimbursement in full.

5. The division shall, immediately upon issuance of the administrative ruling, send a copy thereof by first-class mail to counsel for all parties and to any party not represented by counsel. In the event any party is aggrieved by the director's administrative ruling, that party must file with the division's Jefferson City office a request for evidentiary hearing within twenty (20) days of the date of the administrative ruling, using the division-approved form. In the event no request for evidentiary hearing is filed within twenty (20) days of the date of the administrative ruling, the administrative ruling shall become the final and conclusive determination in the case.

6. Upon timely filing of the request for evidentiary hearing, the division shall assign the case to the local adjudication office of proper venue for evidentiary hearing. The requesting party may withdraw its request for evidentiary hearing, with prejudice, at any time after the filing of the request and prior to the conclusion of the evidentiary hearing. The withdrawal of the request for evidentiary hearing must be in writing and must be signed by the party or counsel. The request for evidentiary hearing may not be withdrawn without prejudice. Upon withdrawal of the request for evidentiary hearing, the administrative ruling shall become the final and conclusive determination in the case.

7. The evidentiary hearing shall be a simple informal proceeding, and shall be held by an administrative law judge at a place and time to be set by the division. The rules of evidence in civil cases shall apply, except that the administrative law judge may consider the information already obtained from the parties by the dispute management unit. A record shall be made of the evidentiary hearing in the same manner as all other evidentiary hearings, as set forth in section 287.460.1, RSMo. No discovery shall be allowed unless specifically ordered in writing by the administrative law judge assigned to the case, and only upon the showing of extraordinary circumstances.

8. Within thirty (30) days of the last day of the hearing, the administrative law judge shall issue an award either awarding additional reimbursement to the health care provider in an amount certain or denying additional reimbursement in full. Either party may file an application for review with the Labor and Industrial Relations Commission within twenty (20) days from the date of the award of the administrative law judge. This review shall be subject to review and appeal in the same manner as provided for other awards in Chapter 287, RSMo.

9. If the employer or insurer fails to comply with the director's administrative ruling, the health care provider may file a complaint with the division's fraud and noncompliance unit pursuant to section 287.128, RSMo.

(I) If the total amount of the additional reimbursement sought is more than one thousand dollars (\$1,000), and the parties are unable to resolve their dispute, the health care provider may file a written application for an evidentiary hearing of the medical fee dispute. The health care provider shall forward a copy of the application for an evidentiary hearing to all parties. The employer or insurer shall file an answer on a division-approved form to the application for an evidentiary hearing within thirty (30) days from the date of the application, unless good cause is found by the division to extend the filing of the answer. If the employer or insurer fails to file a timely answer the facts contained in the application are deemed admitted as true, **but conclusions of law are not deemed admitted**. An evidentiary hearing shall be scheduled in front of an administrative law

judge *[or legal advisor]*. An application for an evidentiary hearing cannot be dismissed without prejudice after an evidentiary hearing has been scheduled, without approval of the administrative law judge *[or legal advisor]*.

[(I)] (J) [Either party] Parties may engage in discovery to the extent authorized by Chapter 287, RSMo.

[(J)] (K) The **evidentiary** hearing shall be held at a place and time to be set by the division. The division shall notify all parties as to the time and place of the hearing. The hearing shall be simple and informal and all parties shall be entitled to be heard and to introduce evidence, however, the rules of evidence in civil proceedings shall apply. The administrative law judge *[or legal advisor]* shall conduct the hearing and shall issue an award deciding the issues in dispute. The award should be completed within thirty (30) days of *[submission of the case] the last day of the hearing*.

[(K)] (L) Either party may file an application for review with the Labor and Industrial Relations Commission within twenty (20) days from the date of the award of the administrative law judge *[or legal advisor]*. This review shall be subject to review and appeal in the same manner as provided for other awards in Chapter 287, RSMo.

[(L)] (M) The parties shall notify the division **in writing** of the date and amount of any settlement of the application for payment of additional reimbursement of medical fees.

[(M)] (N) The division, without a hearing, may reject an application for payment of additional reimbursements of medical fees without prejudice for failure to follow the procedures of this rule.

[(N)] (O) Any settlement of a **reasonableness dispute** or award entered on the application for reimbursement of additional medical fees shall prohibit the health care provider from pursuing any additional fees for work-related medical treatment from the employee **for the health care services that were the subject of the application**.

[(O)] If the health care provider filed an application for payment of additional reimbursement of medical fees prior to the underlying workers' compensation case is dismissed or settlement is approved by the administrative law judge or legal advisor, or an award entered by the administrative law judge, or within the applicable period of limitations, the division retains jurisdiction to hear the dispute. If the parties file an application for payment of additional reimbursement of medical fees after the underlying workers' compensation case is dismissed or settlement is approved by the administrative law judge or legal advisor, or an award is entered by the administrative law judge, or the applicable period of limitations has expired, the division does not have jurisdiction to accept the application. The division shall notify the parties regarding its lack of jurisdiction to hear the dispute.]

(2) Procedures Pertaining to Applications for Direct Payments (Direct Pay Disputes).

(A) An employer or insurer fails to make payment for **authorized** services provided to an employee by a health care provider due to *[an] a work-related injury that is covered under the Missouri Workers' Compensation Law, [and more than ninety (90) days have elapsed since the date of first billing,]* the health care provider may file an application for direct payment with the division.

(B) The *[notice of services provided and request]* application for direct payment shall contain the following information:

1. The name, address and telephone number of the health care provider and, if different, the address where the service was rendered;

2. Name, address and telephone number of the employer and insurer against whom the application is being filed;

3. Name, address and Social Security number of the employee for whom health care services were rendered, together with the date of injury, for all disputes;

4. A brief description of the disputed services rendered; the date services were provided; the amount of money claimed to be owed; and the name and title of the person from the insurer or employer giving authorization *[(if known)]*;

5. Any information the division deems necessary.

(C) The health care provider shall serve the employer or insurer through personal service or by certified mail, return receipt requested, a copy of the application on the person or corporation against whom the application has been filed. The health care provider shall file proof of service in accordance with section (4) of this rule with the division. **The division shall send by first-class mail a copy of the application to the employee, employer, insurer or third-party administrator or their attorneys of record as the case may be.**

(D) The application shall be filed on a form prescribed by the division and shall contain the required information. If the application does not include all the information required by *[paragraph] subsection (B)[1.]* of this *[rule] section* or proof of service is not filed with the division, the application will be returned for the additional information.

(E) The division, without a hearing, may reject an application for direct payment without prejudice if the application does not pertain to a dispute relating to services **that were authorized in advance by the employer or insurer** for a compensable injury or for failure to follow the procedures of this rule.

(F) If there is no report of injury or claim for compensation filed with the division for the **work-related** injury for which the health care *[was] services were* provided, the application will be returned for lack of jurisdiction of the division.

(H) The health care provider is barred from pursuing the employee for any work-related costs incurred in pursuing the medical fee dispute and any reduction in payment of a medical charge. This rule is not intended to prohibit the provider from pursuing the responsible party for payment of fees for medical treatment that is found by award or settlement not to be *[work-related] compensable*.

[(I) [The division shall lose jurisdiction to hear medical fee disputes relating to direct payments after the underlying workers' compensation case is dismissed or settlement approved by the administrative law judge or legal advisor or an award is entered by the administrative law judge.]
Requesting and Issuing Awards on Undisputed Facts.

1. An application for direct payment may be denied in full by an administrative law judge without an evidentiary hearing by issuing an award on undisputed facts in accordance with the following procedures. The employer or insurer may file a request for an award on undisputed facts in regard to the application for direct payment on the sole ground that the health care services for which direct payment is being sought were not authorized by employer or insurer. The request for an award on undisputed facts shall be filed on the approved division form. The request for an award on undisputed facts shall state with particularity each material fact as to which the employer or insurer claims there is no genuine issue, with specific references to the contents of the application for direct payment, deposition testimony, affidavits and documents that demonstrate the lack of a genuine issue as to such facts. Each request for an award on undisputed facts shall have attached thereto the affidavits, portions of deposition transcripts, and other documents relied upon in the request.

2. Within thirty (30) days after a request for an award on undisputed facts is filed with the division, the health care provider shall file its response on the approved division form. The response shall admit or deny each of the factual statements contained in the request. A denial may not rest upon mere allegations or general denials. Rather, the response shall support each denial with specific references to the depositions, documents or affidavits that demonstrate specific facts showing that there is a genuine issue to be decided at an evidentiary hearing. Attached to the response shall be a copy of the affidavits, deposition transcripts (or portions thereof), and other documents upon which the response relies. The response may also set forth, in detail, additional material facts that remain in dispute.

3. Upon timely filing of the response, the administrative law judge assigned to the case shall proceed to ruling on the request

for an award on undisputed facts. If no response is filed within the thirty (30) days allotted (unless extended by written order of an administrative law judge), the facts as set forth in the request for an award on undisputed facts shall be deemed as true, and the administrative law judge assigned to the case shall proceed to ruling on the request for an award on undisputed facts. If the request for an award on undisputed facts and response show that there is no genuine issue as to any material fact and that the application for direct payment should be denied in full, the administrative law judge shall enter an award on undisputed facts denying the application for direct payment in full. Such award shall be a final reviewable award in the case as to the application for direct payment.

4. The health care provider may file an application for review with the Labor and Industrial Relations Commission within twenty (20) days from the date of the award of the administrative law judge. This review shall be subject to review and appeal in the same manner as provided for other awards in Chapter 287, RSMo.

5. If the request for an award on undisputed facts and response show that there is a genuine issue as to any material fact, the administrative law judge shall issue an order denying the request for an award on undisputed facts. An order denying the request for an award on undisputed facts is not a final award as to any issue, and is not subject to review or appeal.

(5) Requesting Records, Confidentiality and Storage.

(A) The Report of Injury and subsequent medical reports are considered closed records pursuant to section 287.380.3, RSMo. Section 610.021(14), RSMo authorizes the division to close the records which are protected from disclosure by law.

(B) If a person submits records to the division and wishes to claim that the record is closed or confidential, the division will maintain the record as closed, except that information that is closed pursuant to section 287.380.3, RSMo will be provided to a requesting person who is party to the workers' compensation case or an attorney who has filed an entry of appearance representing a party to the workers' compensation case or to a party in a reasonableness case. In order to claim the record as closed or confidential, the person submitting the record must state in bold or other clearly distinguishable type on the face of the record or in the face of the cover letter accompanying the record, that the record is closed or confidential and the reason the record is asserted to be closed or confidential.

(C) The requesting person may obtain records from the division by submitting a request in writing to the division's Jefferson City office at PO Box 58, Jefferson City, MO 65102. The requesting person must state their relationship to the case as set forth in 8 CSR 50-2.020(4)(C). Records as legally required will be provided in response to a subpoena duces tecum or Release of Information Form duly signed by the person giving the division authorization to release the records.

(D) The division will charge for copies of documents and certification of documents according to section 287.660, RSMo, or Chapter 610, RSMo, if applicable.

(E) The division reserves the right to store the documentation submitted in a medical fee dispute proceeding either electronically or in a paper file.

(6) The division-approved forms as referenced in these rules may be obtained from the website address <http://www.dolir.mo.gov/wc/forms/forms.htm> or by contacting the division at (573) 522-2546 or by submitting a written request to the division's Jefferson City office at PO Box 58, Jefferson City, MO 65102.

effective Feb. 19, 1993, expired June 18, 1993. Emergency rule filed June 29, 1993, effective July 9, 1993, expired Nov. 5, 1993. Emergency rule filed Nov. 16, 1993, effective Nov. 26, 1993, expired March 25, 1994. Emergency rule filed June 28, 1994, effective July 8, 1994, expired Nov. 4, 1994. Emergency rule filed Oct. 20, 1994, effective Nov. 5, 1994, expired March 4, 1995. Emergency rule filed Aug. 18, 1995, effective Aug. 28, 1995, expired Feb. 23, 1996. Original rule filed Aug. 18, 1995, effective Feb. 24, 1996. Rescinded and readopted: Filed Jan. 21, 2000, effective Sept. 30, 2000. Emergency amendment filed Aug. 15, 2006, effective Sept. 1, 2006, expires Feb. 27, 2007. Amended: Filed Aug. 15, 2006.

PUBLIC COST: *This proposed amendment will cost the Missouri Division of Workers' Compensation approximately seventy thousand five hundred forty-eight dollars (\$70,548) to seventy-five thousand eight hundred forty dollars (\$75,840) in the aggregate.*

PRIVATE COST: *This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.*

NOTICE TO SUBMIT COMMENTS: *Anyone may file a statement in support of or in opposition to this proposed amendment with the Division of Workers' Compensation, Attn: Patricia "Pat" Secrest, PO Box 58, Jefferson City, MO 65102-0058. To be considered, comments must be received within thirty (30) days after publication of this notice in the Missouri Register. No public hearing is scheduled.*

**FISCAL NOTE
PUBLIC COST**

I. RULE NUMBER

Rule Number and Name:	8 CSR 50-2.030 Resolution of Medical Fee Disputes
Type of Rulemaking:	Proposed Amendment

II. SUMMARY OF FISCAL IMPACT

Affected Agency or Political Subdivision	Estimated Cost of Compliance in the Aggregate
Missouri Division of Workers' Compensation	Approximately \$70,548 - \$75,840

III. WORKSHEET

The Division of Workers' Compensation will employ one mediator who will be an attorney making approximately \$44,472 annually, to prepare a recommendation for the Division Director, based upon a request for administrative ruling filed by a party. The Division will utilize the existing clerical Administrative Office Support Assistant at approximately \$26,076 annually, to assist in part with the Medical Fee Disputes. This brings the total for personal service at approximately \$70,548. In addition, the Division estimates that this amendment will increase mailings by maximum of 2,500 pieces of mail annually costing the Division approximately \$1,000. The Division anticipates that the administrative ruling will conserve judicial resources and staff time to set and adjudicate the medical fee disputes. It will streamline the dispute resolution process for all interested parties. The total amount of savings to the Division is unknown at this time.

IV. ASSUMPTIONS

See No. III

**Title 11—DEPARTMENT OF PUBLIC SAFETY
Division 10—Adjutant General
Chapter 5—Missouri Veterans' Recognition Program**

PROPOSED AMENDMENT

11 CSR 10-5.010 Missouri Veterans' Recognition Program. The Adjutant General is amending the Purpose, sections (1), (2), (3), (4), (6), (7), (8) and (10).

PURPOSE: This amendment expands the recognition program to include the Vietnam War veterans who were honorably discharged and reside as a legal resident of the state or was a legal resident of the state of Missouri at the time he or she entered or was discharged from military service or at the time of his or her death.

PURPOSE: This rule prescribes guidelines as required by sections 42.175, 42.200, and 42.222, RSMo, to administer the World War II Veterans' Recognition, [and the] Missouri World War II "D-Day" Invasion of Europe, Korean Conflict and Vietnam War Medal Program. These guidelines provide a framework for World War II, Korean Conflict and Vietnam War veterans to apply for medal, medallion, and certificates in recognition of their service to Missouri and our nation during the World War II, Korean and Vietnam Wars.

(1) Definitions as used in this rule, unless the context clearly indicates otherwise, the following terms shall mean:

(A) Adjutant General—As defined in Chapter 41, *Revised Statutes of Missouri*, section [41.110] **41.160** and all amendments thereto;

(B) Appropriate service records—Military records documenting the honorable service of a veteran in the armed forces of the United States eligibility for awards authorized under the Missouri World War II, **Korean Conflict and Vietnam War** Recognition Program. A Department of Defense DD-214 or other document acceptable to the Adjutant General;

(I) Eligible World War II veteran—Any person defined as a veteran by the United States Department of Veterans Affairs, who honorably served on active duty in the United States military service at anytime beginning December 7, 1941 and ending December 31, 1946 provided [1)]—

1. [t/That such veteran [was] is a legal resident of the state of Missouri or was a legal resident of this state at the time he or she entered or was discharged from military service or at the time of his or her death; and [2)]

2. [s/Such veteran was honorably separated or discharged from military service or is still in active service in honorable status, or was legal resident of this state at the time of his or her death;

(J) Eligible Korean Conflict Veteran—Any person defined as a veteran by the United States Department of Veterans Affairs, who honorably served on active duty in the United States military service at anytime beginning June 27, 1950 and ending January 31, 1955 provided—

1. That such veteran [was] is a legal resident of the state of Missouri or was a legal resident of this state at the time he or she entered or was discharged from military service or at the time of his or her death; and

2. Such veteran was honorably separated or discharged from military service or is still in active service in honorable status, or was a legal resident of this state at the time of his or her death;

(K) Eligible Vietnam War Veteran—Any person defined as a veteran by the United States Department of Veterans Affairs, who honorably served on active duty in the United States military service at anytime beginning February 28, 1961 and ending May 7, 1975 provided—

1. That such veteran is a legal resident of the state or was a legal resident of the state of Missouri at the time he or she entered or was discharged from military service or at the time of his or her death; and

2. Such veteran was honorably separated or discharged from military service or is still in active service in honorable status, or

was in active service in honorable status at the time of his or her death;

[[K)] (L) Honorably separated—The release from military service or duty under honorable conditions;

[[L)] (M) Honorable status—Attesting to creditable conduct while serving on active duty in the military;

[[M)] (N) Intestate survivor—The survivor of a [World War II] veteran who has died without a will;

[[N)] (O) Eldest living survivor—the eldest survivor of a veteran connected by blood or affinity;

[[O)] (P) Jubilee of Liberty Medal—A medal created by the Regional Council of Normandy, France, in 1994 to commemorate the 50th anniversary of the June 6, 1944, "D-Day" invasion of Europe;

[[P)] (Q) Korean Conflict—The United States led United Nations forces to defend South Korea from North Korean invaders aided by China and the former Soviet Union, beginning June 27, 1950 and ending January 31, 1955;

[[Q)] *Korean Conflict Veterans' Recognition Award Fund—As defined in section 42.206, RSMo, consisting of all gifts, donations and bequests to the fund to be administered by the Adjutant General;*

(R) Vietnam War—The war beginning February 28, 1961 and ending May 7, 1975;

[[R)] (S) Legal resident—A person (veteran) whose official United States mailing address is within the boundaries of the state of Missouri;

[[S)] (T) Medal—A small object usually metal in nature bearing an emblem or picture that is issued to commemorate a person's participation in an event or is awarded for excellence or achievement;

[[T)] (U) Medallion—An object or coin, usually round or oval in shape, resembling a medal;

[[U)] (V) Replica—A close reproduction or facsimile of the original;

[[V)] (W) Spouse—Married person, i.e.: husband, wife;

[[W)] (X) Veteran—Any person defined as a veteran by the United States Department of Veterans' Affairs or its successor agency;

[[X)] (Y) Veterans Commission—The commission created by section 42.007, RSMo;

[[Y)] (Z) World War II—The World War beginning December 7, 1941, and ending December 31, 1946;

[[Z)] (AA) World War II, Korean Conflict and Vietnam War Veterans' Recognition Award Funds—As defined in sections 42.195, 42.206 and 42.226, RSMo, consisting of gifts, bequests, and donations to be administered by the Adjutant General.

(2) The Adjutant General is responsible for the administration of the Missouri World War II Veterans' Recognition and the World War II "D-Day" Invasion of Europe, **Korean Conflict and Vietnam War** Medal Programs and, subject to an appropriation for this purpose, will distribute a medal, medallion, and certificate to each qualified Missouri [World War II] veteran.

(3) Design.

(A) The Veterans Commission is responsible for the design of the form of the medallions, medals, and certificates and will provide the approved designs to the Adjutant General for distribution.

(4) To be eligible for the World War II, [or] Korean Conflict or Vietnam War Veterans' Recognition Awards, the veteran must:

(A) Have served on active duty in the United States military service at anytime beginning December 7, 1941, and ending December 31, 1946 for the World War II award; [and] June 27, 1950, and ending January 31, 1955 for the Korean Conflict award; and February 28, 1961, and ending May 7, 1975 for the Vietnam War;

(B) Be a legal resident of Missouri or was a legal resident of this state at the time he or she entered or was discharged from military service or was in active service in honorable status at the time of his or her death;

(6) World War II, “D-Day” Invasion of Europe, [and] Korean Conflict, and Vietnam War veterans, to obtain authorized medals, medallions, and certificates, must complete an application form and provide copies of appropriate military service record verification forms to the Office of the Adjutant General, Attention: Director, Missouri Veterans’ Recognition Program, [2303] 2302 Militia Drive, Jefferson City, MO 65101-1203. World War II and Jubilee of Liberty award applications must be submitted anytime after January 1, 2001. Korean Conflict Award applications must be submitted anytime after January 1, 2004. **Vietnam War Award applications must be submitted anytime after January 1, 2007.** Applications and service forms will not be returned and will become property of the state of Missouri.

(7) Application forms may be obtained by contacting the Office of the Adjutant General or contacting local Missouri Veterans Commission offices. Forms will also be provided to Missouri veterans’ organizations upon request to the Director, Veterans’ [World War II] Recognition Program.

(8) If any person dies after applying for a medallion, medal and a certificate [pursuant to sections 42.170 to 42.206, RSMo,] and such person would have been entitled to the medallion, medal, and the certificate, the Adjutant General shall award the medallion, medal, and the certificate in the following order:

(10) Eligibility Determination.

(A) If the Adjutant General disallows any veteran’s claim to a medallion, medal, and a certificate [pursuant to sections 42.170 to 42.190, RSMo, for World War II and/or the “D-Day” Invasion of Europe recognition programs], a statement of the reason for the disallowance shall be filed with the application and a notice of ineligibility will be mailed to the applicant at the applicant’s last known address.

(B) The notice of ineligibility will include information on the appeal process for applicants whose requests for [World War II Recognition Programs] awards are denied. Denied applicants will have thirty (30) days from receipt of notices of ineligibility to submit written appeals.

AUTHORITY: section 42.175, RSMo Supp. [2004] 2005. Original rule filed Sept. 14, 2000, effective March 30, 2001. Emergency amendment filed July 22, 2002, effective Aug. 1, 2002, expired Feb. 27, 2003. Amended: Filed July 22, 2002, effective Jan. 30, 2003. Emergency amendment filed July 25, 2003, effective Aug. 21, 2003, expired Feb. 17, 2004. Amended: Filed July 25, 2003, effective Feb. 29, 2004. Emergency amendment filed July 19, 2005, effective July 29, 2005, expired Jan. 24, 2006. Amended: Filed July 19, 2005, effective Jan. 30, 2006. Emergency amendment filed Aug. 7, 2006, effective Sept. 7, 2006, expires Feb. 24, 2007. Amended: Filed Aug. 7, 2006.

PUBLIC COST: This proposed amendment will cost state agencies or political subdivisions \$1,609,823 in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Office of the Adjutant General, Department of Public Safety, 2302 Militia Drive, Attn: JFMO-SX, Jefferson City, MO 65101. To be considered, comments must be received within thirty (30) days after publication of this notice in the Missouri Register. No public hearing is scheduled.

**FISCAL NOTE
PUBLIC COST****I. RULE NUMBER**

Rule Number and Name:	11 CSR 10-5.010 Missouri Veterans Recognition Program
Type of Rulemaking:	Proposed Amendment

II. SUMMARY OF FISCAL IMPACT

Affected Agency or Political Subdivision	Estimated Cost of Compliance in the Aggregate
DPS/Office of the Adjutant General	\$1,609,823
(Veterans Commission CI Trust Fund)	
	\$1,609,823

III. WORKSHEET

All costs reflected in fiscal note for HB 978 Vietnam War Veteran Recognition Award (93rd General Assembly) are estimates, actual program costs will vary based on the amount of recognition award requests received. Personal service and expense and equipment operating costs projected in this note include salaries, fringe benefits, contract labor, awards, mailing costs, public awareness programs and other miscellaneous program operating expense and equipment items.

IV. ASSUMPTIONS

RSMo. 313.835 1(2)f, authorizes monies deposited in the Veterans Commission Capitol Improvement Trust Fund (VCCITF) to be used to support the WWII, Korean War and the Vietnam War Veteran Recognition Programs.

By extending the Veteran Recognition Programs indefinitely (as long as the existing medal supply stock lasts), and making legal residents of this state at the time they entered or were discharged from service or at the time of their death eligible to apply for the award. It is assumed that many of Missouri's 435,000 WW II, 150,000 Korean War, and the 230,000 Vietnam War Veterans will apply for awards.

The OTAG assumes both temporary state employees and contract labor will be employed to administer the program. Currently the OTAG has approximately 2,000 WW II medals, 500 Jubilee of Liberty medals and 5,000 Korean War medals in stock. Vietnam War medals will be procured based on the number of applications received and will be increased to meet demand. In addition to the personnel costs the OTAG anticipates expenses for medals, mailing, packaging, certificates, etc. not to exceed \$1,609,823 in FY 07, 08, and 09.

**Title 11—DEPARTMENT OF PUBLIC SAFETY
Division 50—Missouri State Highway Patrol
Chapter 2—Motor Vehicle Inspection Division**

PROPOSED AMENDMENT

11 CSR 50-2.320 School Bus Inspection. The division is amending sections (2), (4), (18), (21), (22), (23) and (24) of the rule.

PURPOSE: This amendment removes rejection criteria for strobe lights and side windows, updates requirements for outside mirrors and provides additional rejection criteria and out-of-service criteria for tires.

(2) Lighting Equipment and Signalling Devices.

[(I) Strobe Light. A school bus may be equipped with no more than one (1) white strobe light that has been approved by the Missouri Department of Public Safety for use on school buses. When a strobe light is mounted on a Type C or D school bus, it shall be mounted on the rear of the rooftop between six and ten feet (6'–10') from the rear end of the bus. On Type A or B school buses, the strobe light shall be mounted as near the midpoint of the roof as practicable, so that its illumination is visible to a motorist approaching the bus from any direction. If the bus is equipped with an emergency roof hatch, the strobe light shall be mounted behind the rearmost roof hatch.]

[(J)] (I) Observe Function of Lights and Signalling Devices.

1. Reject vehicle if:

A. Not equipped with required lights, reflectors and signalling devices;

B. Any lighting device or reflector is obstructed;

C. Any required light, reflector or signalling device fails to function properly;

D. Any light, reflector or signalling device is not securely mounted;

E. Any light, reflector or signalling device shows a color contrary to these regulations;

F. A lens or reflector is badly broken or if any part is missing or is incorrectly installed; *or*.

[G. The strobe light is not mounted as prescribed, is not of the approved type, is not white in color or fails to function properly.]

(4) Mirrors.

(B) [Outside] Exterior Mirrors. *[Parabolic-type mirrors may be substituted for a double mirror.]*

[1. School buses manufactured before October 1, 1981, shall be equipped with the following mirror configuration as a minimum:

	LH Flat Rearview	LH Convex Rearview	LH Convex Crossview	RH Flat Rearview	RH Convex Crossview	RH Convex Rearview
Type A	X		X*	X		
Type B	X		X*	X		
Type C	X		X*	X		
Type D	X		X*	X		

*May be mounted on right side.

Flat rearview mirror shall be at least fifty (50) square inches, firmly supported and adjustable.

Convex mirror shall be at least seven and one-half inches (7 1/2") in diameter.

2. School buses manufactured after October 1, 1981, shall be equipped with the following mirror configuration as a minimum:

	LH Flat Rearview	LH Convex Rearview	LH Convex Crossview	RH Flat Rearview	RH Convex Crossview	RH Convex Rearview
Type A	X		X*	X	X**	
Type B	X		X*	X	X**	
Type C	X		X*	X	X**	
Type D	X		X*	X	X**	

*Convex mirror shall be at least seven and one-half inches (7 1/2") in diameter.

Flat rearview mirror shall be at least fifty (50) square inches, firmly supported and adjustable.

**May be either a single or double mirror, to enable driver to see the right front and side of bus. Each mirror shall be a minimum of thirty-five (35) square inches.

3. School buses manufactured after March 1, 1987, shall be equipped with the following:

	LH Flat Rearview	LH Convex Rearview	LH Convex Crossview	RH Flat Rearview	RH Convex Crossview	RH Convex Rearview
Type A	X	X	X*	X	X**	X
Type B	X	X	X*	X	X**	X
Type C	X	X	X*	X	X**	X
Type D	X	X		X	X**	X

*Convex mirror shall be at least seven and one-half inches (7 1/2") in diameter.

**May be either a single or double mirror to enable driver to see the right front and side of bus. Each mirror shall be a minimum of thirty-five (35) square inches. Elliptical or hemispherical mirrors may be substituted on a two-for-one basis if indirect visibility requirements are met. Flat rearview mirror shall be at least fifty (50) square inches, firmly supported and adjustable.

(C) *Rear Vision Mirror.* All school buses manufactured after July 1, 1993, shall be equipped with a mirror system capable of providing a view along the left and right sides of the bus which shall provide the driver with a view of the rear tires at ground level, a minimum distance of two hundred feet (200') to the rear of the bus and at least twelve feet (12') perpendicular to the side of the bus at a distance of thirty-two feet (32') back from the front bumper.

(D) *Crossview Mirror System.* All school buses manufactured after July 1, 1993, shall be equipped with a crossview mirror system which shall provide the driver with indirect vision of an area at ground level from the front bumper forward and the entire width of the bus to a point where the driver can see by direct vision. The crossview system shall also provide the driver with indirect vision of the area at ground level around the left and right front corners of the bus, to include the tires and service entrance on all types of buses to a point where it overlaps with the rear vision mirror system.]

1. All school buses shall be equipped with flat rearview, convex rearview and convex crossview mirrors on the left and right sides of the bus. (Buses manufactured prior to March 1, 1987 do not require left and right convex rearview mirrors).

2. Convex crossview mirrors on the right side of buses may be either a single or double mirror that provides the driver a clear view of the right front and side of the bus. Convex crossview mirrors shall be a minimum of seven and one-half inches (7 1/2") in diameter.

3. All school buses manufactured after July 1, 1993, shall be equipped with a rearview mirror system that provides the driver a clear view of the rear tires at ground level on the left and right sides of the bus.

4. All school buses manufactured after July 1, 1993, shall be equipped with a crossview mirror system that provides the driver a clear indirect view of an area at ground level from the front bumper forward and the entire width of the bus to a point where the driver can see by direct vision. The crossview system shall also provide the driver a clear indirect view of the area at ground level around the left and right front corners of the bus, to include the tires and service entrance on all types of buses to a point where it overlaps with the rearview mirror system.

[(E)](C) Inspect Mirrors.

[(F)] (D) Reject vehicle if:

1. Not equipped with required mirrors;
2. A mirror is not mounted on stable support or is improperly mounted; or
3. A mirror is cracked, pitted, obstructed or clouded to the extent that vision is obscured.

(18) Tires.

(E) Reject any school bus if:

1. Any tire has knots or exposed cord;
2. The tread depth is less than four-thirty-seconds inch (4/32") for the front tires or less than two-thirty-seconds inch (2/32") of the rear tires when measured [in any two (2) adjacent major grooves at three (3) locations equally spaced around the outside of the tire] at any point on a major tread groove;

3. A Type A2, B, C or D school bus is not equipped with dual rear tires;

4. Regrooved, recapped or retreaded tires are used on the front wheels; or

5. The tires on a given axle are of a different size or type[.];

6. Any tire is flat or has a noticeable leak (e.g., can be heard or felt).

[(21)] Side Windows.

(A) All full side windows must be capable of opening at least nine inches (9").

(B) Inspect all full side windows to ensure ability to open.

(C) Reject any school bus if any side window is not capable of opening.]

[(22)](21) Frame.

(A) Inspect the frame.

(B) Reject any school bus if there are any unrepaired visible cracks.

[(23)](22) Compartment Condition.

(A) The compartment will be in good repair, with no sharp-edged tears or holes in the compartment walls, floors, doors or ceiling.

(B) Inspect the compartment.

(C) Reject vehicle if compartment contains any sharp-edged tears or holes in the compartment walls, floors, doors or ceiling.

[(24)](23) Out-of-Service Criteria. The following items will result in buses being put out-of-service until needed repairs are made. These criteria will be used only by Missouri State Highway Patrol personnel and are not applicable at official inspection stations:

(A) If there is a major exhaust leak in the exhaust system which dumps exhaust in front of the rear axle;

(B) If there are major steering or suspension defects;

(C) If there are major brake defects;

(D) If the stop signal arm is inoperative;

(E) If the front or rear tires have knots or exposed cord or the tread depth is less than four-thirty-seconds inch (4/32") on the front tires or less than two-thirty-seconds inch (2/32") on the rear tires when measured [in any two (2) major grooves at three (3) locations spaced approximately equally around the outside of the tire] at any point on a major tread groove;

(F) If any tire is flat or has a noticeable leak (e.g., can be heard or felt);

[(F)](G) If any emergency door is inoperable from either the inside or outside or any other emergency exit fails to open;

[(G)] (H) If the red overhead warning flashers are inoperative;

[(H)](I) If the one-half inch (1/2") hex nut attached to one (1) end of a one-eighth inch (1/8") drawstring catches on the handrail and lodges between the handrail mounting bracket and the sheet metal body of the bus or the drawstring catches during the handrail drawstring test;

[(I)](J) If not equipped with crossing arm as required or if the crossing arm does not operate when the stop signal arm and overhead warning flashers are activated;

[(J)](K) If fuel is leaking from any part of the fuel system; or

[(K)](L) If the frame has any unrepaired visible cracks.

AUTHORITY: sections 307.360.2, RSMo 2000 and 307.375, RSMo Supp. 2005. Original rule filed Nov. 4, 1968, effective Nov. 14, 1968. For intervening history, please consult the *Code of State Regulations*. Amended: Filed Aug. 10, 2006.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Department of Public Safety, Missouri State Highway Patrol, PO Box 568, Jefferson City, MO 65102-0568. To be considered, comments must be received within thirty (30) days after publication of this notice in the *Missouri Register*. No public hearing is scheduled.

**Title 14—DEPARTMENT OF CORRECTIONS
Division 80—State Board of Probation and Parole
Chapter 5—Intervention Fee**

PROPOSED AMENDMENT

14 CSR 80-5.020 Intervention Fee Procedure. Probation and Parole is amending section (1) and replacing the Request for Waiver of Intervention Fees form.

PURPOSE: This amendment deletes a provision which prohibited advance payment of the intervention fee. This amendment also moves the location of the provision which requires the monthly payment of an intervention fee. In addition the Request for Waiver of Intervention Fees form has been replaced with a form by the same name that uses the 2006 U.S. Dept. of Health and Human Services Poverty Guidelines instead of the 2005 guidelines. The format of the form has also been modified.

(1) The following procedures apply to the collection of an offender intervention fee.

(C) Fees will be collected as follows:

1. Offenders shall be provided instructions on payment methods and procedures. Staff shall not accept money in any form from an offender;

2. The intervention fee shall be due on the first day of the first full month following placement under board supervision on probation, parole, or conditional release. **The fee shall be due thereafter on the first working day of each month until supervision is terminated;**

3. Payments shall be deemed delinquent after the fifteenth day of the month, including the final month of supervision;

4. Pre-printed envelopes, payment vouchers, and payment instructions will be provided to the offender; and

5. Payment instructions to the offender will indicate the following:

A. Payments must be submitted directly to the designated collection authority. Probation and parole staff will not accept payments;

B. Only money orders and cashier's checks will be accepted. Personal checks and cash will not be accepted; **and**

C. The completed payment voucher shall accompany the payment.; **and**

D. Payments may not be made in advance and shall be submitted on or after the first working day of the month for which the payment is being made.]

(H) If an offender is unable to pay because of having insufficient income, fees may be waived in whole or in part. In these cases the following steps shall be taken:

1. Offenders, whose total verified income is at or below the insufficient income criteria, may be considered for a waiver. Unemployed offenders capable of being gainfully employed are not eligible for a waiver. An offender's income is considered insufficient if it is at or below the amount shown in the Insufficient Income Criteria chart included in the Request for Waiver of Intervention Fees, included herein. Income from all family members in the household is used to calculate whether the waiver is appropriate. If a person lives with /a/ **his or her** family, the combined income of all family members will be used (non-relatives, such as housemates, do not count). For a waiver to be considered, the offender must provide appropriate records to document household income.

2. Once the officer verifies the offender meets one of the waiver criteria above, the officer will complete the Request for Waiver of Intervention Fees form and submit it to the district administrator for approval.

3. If approved, waivers are valid for a maximum of ninety (90) days. The district administrator shall make the waiver entry into the computer system. If the officer determines the waiver should be

renewed beyond that point, a new Request for Waiver of Intervention Fees form must be submitted for approval. However, at any point the officer determines that the offender is again capable of paying monthly intervention fees, supervisory approval is not necessary to rescind the waiver.



STATE OF MISSOURI
DEPARTMENT OF CORRECTIONS
BOARD OF PROBATION AND PAROLE
REQUEST FOR WAIVER OF INTERVENTION FEES

OFFENDER NAME	DOC NUMBER	DATE
NUMBER OF ADULT FAMILY MEMBERS IN HOUSEHOLD	NUMBER OF ADULT FAMILY MEMBERS WITH INCOME	NUMBER OF DEPENDENTS

REASON FOR EXEMPTION (Does not require MWIF entry or renewal – automated based on tracking or sentence type)

- ☐ Drug Court
 ☐ Deferred Prosecution
☐ Pre-Trial
 ☐ EMP, CRC, RF → Projected Completion Date:

REASON FOR WAIVER REQUEST (Requires renewal in MWIF every 90 days)

- ☐ Confined (JAL) Date Confined: Anticipated Release Date:
☐ Interstate Transfer (IST) Date Departed Missouri:
☐ Insufficient Income (INC)

INSUFFICIENT INCOME CRITERIA

CHECK WHICH APPLIES	PERSONS IN FAMILY UNIT	ANNUAL INCOME	MONTHLY INCOME	VERIFIED TOTAL INCOME
<input type="checkbox"/>	1	\$9,800	\$817	
<input type="checkbox"/>	2	\$13,200	\$1,100	
<input type="checkbox"/>	3	\$16,600	\$1,383	
<input type="checkbox"/>	4	\$20,000	\$1,667	
<input type="checkbox"/>	5	\$23,400	\$1,950	
<input type="checkbox"/>	6	\$26,800	\$2,233	
<input type="checkbox"/>	7	\$30,200	\$2,517	
<input type="checkbox"/>	8	\$33,600	\$2,800	
	Each additional person add	\$3,400	\$283	

(Figures are based on 2006 U.S. Dept. Of Health and Human Services Poverty Guidelines)

NOTE: Hourly wage may be multiplied by 168 to compute the approximate monthly income.

OFFICER/EMPLOYEE NUMBER	DATE	DISTRICT ADMINISTRATOR/CAO/DESIGNEE	DATE
THIS WAIVER REQUEST IS →		<input type="checkbox"/> APPROVED <input type="checkbox"/> NOT APPROVED	
WAIVER EFFECTIVE DATE:		WAIVER EXPIRATION DATE:	
DATE WAIVER ENDED:		REASON WAIVER ENDED:	

AUTHORITY: sections 217.040 and 217.755, RSMo 2000 and 217.690, RSMo Supp. 2005. Emergency rule filed Oct. 6, 2005, effective Nov. 1, 2005, expired April 29, 2006. Original rule filed Oct. 6, 2005, effective April 30, 2006. Amended: Filed Aug. 7, 2006.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Department of Corrections, State Board of Probation and Parole, Scott Johnston, Chief State Supervisor, 1511 Christy Drive, Jefferson City, MO 65101 or by email at Scott.Johnston@doc.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the *Missouri Register*. No public hearing is scheduled.

**Title 16—RETIREMENT SYSTEMS
Division 50—The County Employees’
Retirement Fund**

**Chapter 10—County Employees’ Defined Contribution
Plan**

PROPOSED AMENDMENT

16 CSR 50-10.050 Distribution of Accounts. The board is amending subsection (2)(B).

PURPOSE: This amendment amends the rules relating to limitations on hardship distributions under the defined contribution plan.

(2) Distribution Due to Hardship. A Participant may request a distribution due to Hardship by submitting a request to the Board (or its designee) in such form as may be permitted by the Board (or its designee). The Board (or its designee) shall have the authority to require such evidence as it deems necessary to determine if a distribution is warranted. If an application for a distribution due to a Hardship is approved, the distribution is limited to the lesser of—

(B) The amount held in the Participant’s [rollover account] Account, including all subaccounts, to the extent the Participant is vested in such amounts.

The amount of the need shall include any amounts necessary to pay any federal, state or local income taxes (including withholding) or penalties reasonably anticipated to result from the distribution. The allowed distribution shall be paid in a single sum to the Participant as soon as administratively feasible after approval of such distribution.

AUTHORITY: sections 50.1250, RSMo Supp. 2005 and 50.1260, RSMo 2000. Original rule filed May 9, 2000, effective Jan. 30, 2001. For intervening history, please consult the *Code of State Regulations*. Amended: Filed Aug. 14, 2006.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the

County Employees’ Retirement Fund, 2121 Schotthill Woods Drive, Jefferson City, MO 65101. To be considered, comments must be received within thirty (30) days after publication of this notice in the *Missouri Register*. No public hearing is scheduled.

**Title 19—DEPARTMENT OF HEALTH AND
SENIOR SERVICES
Division 60—Missouri Health Facilities Review
Committee
Chapter 50—Certificate of Need Program**

PROPOSED AMENDMENT

19 CSR 60-50.300 Definitions for the Certificate of Need Process. The committee proposes to amend section (18).

PURPOSE: This rule is amended because the Certificate of Need Program office was moved to a new physical location.

(18) The most current version of Form MO 580-1863 may be obtained by mailing a written request to the Certificate of Need Program (CONP), [915G Leslie Boulevard] PO Box 570, Jefferson City, MO 65101/2, or in person at the CONP Office, or, if technically feasible, by downloading a copy of the form from the CONP website at www.dhss.mo.gov/conp.

AUTHORITY: section 197.320, RSMo 2000. Original rule filed June 2, 1994, effective Nov. 30, 1994. For intervening history, please consult the *Code of State Regulations*. Emergency amendment filed Aug. 14, 2006, effective Aug. 28, 2006, expires Feb. 23, 2007. Amended: Filed Aug. 14, 2006.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE OF PUBLIC HEARING AND NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support or in opposition to this proposed amendment with Thomas R. Piper, Director, Certificate of Need Program, PO Box 570, Jefferson City, MO 65102. To be considered, comments must be received by 12:00 p.m. (noon) on October 16, 2006. A public hearing has been scheduled for October 16, 2006, at 10:00 a.m. at the Certificate of Need Program Office located at the Jefferson State Office Building, Suite 1315, 205 Jefferson Street, Jefferson City, Missouri.

**Title 19—DEPARTMENT OF HEALTH AND
SENIOR SERVICES
Division 60—Missouri Health Facilities Review
Committee
Chapter 50—Certificate of Need Program**

PROPOSED AMENDMENT

19 CSR 60-50.400 Letter of Intent Process. This amendment modifies the agency name, report title, address, and website in sections (3), (5) and (7).

PURPOSE: This rule is amended because the Certificate of Need Program office was moved to a new physical location, changed its website address, and responded to a reorganization of the Department of Health and Senior Services.

(3) A LTC bed expansion or replacement as sought pursuant to section 197.318.8 through 197.318.10, RSMo, requires a CON application, if the capital expenditure for such bed expansion or replacement exceeds six hundred thousand dollars (\$600,000), but allows for shortened information requirements and review time frames. When a LOI for a LTC bed expansion, except replacement(s), is filed, the Certificate of Need Program (CONP) staff shall immediately request certification for that facility of average licensed bed occupancy and final Class 1 patient care deficiencies for the most recent six (6) consecutive calendar quarters by the Division of *[Senior Services and]* Regulation *[(DSSR)]* and **Licensure (DRL)**, Department of Health and Senior Services, through a LTC Facility Expansion Certification (Form MO 580-2351) to verify compliance with occupancy and deficiency requirements pursuant to section 197.318.8, RSMo. Occupancy data shall be taken from the *[DSSR's]* **DRL's** most recently published Six-Quarter Occupancy of Intermediate Care and Skilled Nursing Facility (or Residential Care and Assisted Living Facility) Licensed Beds reports. For LTC bed expansions or replacements, the sellers and purchasers shall be defined as the owner(s) and operator(s) of the respective facilities, which includes building, land, and license. On the Purchase Agreement (Form MO 580-2352), both the owner(s) and operator(s) of the purchasing and selling facilities should sign.

(5) For a LTC bed expansion proposal pursuant to section 197.318.8(1)(e), RSMo, the CONP Staff shall request occupancy verification by the *[DSSR]* **DRL** who shall also provide a copy to the applicant.

(7) The most current version of Forms MO 580-2351, MO 580-2352, and MO 580-1871 may be obtained by mailing a written request to the CONP, *[915G Leslie Boulevard]* **PO Box 570**, Jefferson City, MO 65101/12, or in person at the CONP Office, or, if technically feasible, by downloading a copy of the forms from the CONP website at *[www.dhss.state.mo.us/con]* **www.dhss.mo.gov/con**.

AUTHORITY: section 197.320, RSMo 2000. Original rule filed June 2, 1994, effective Nov. 30, 1994. For intervening history, please consult the Code of State Regulations. Emergency amendment filed Aug. 14, 2006, effective Aug. 28, 2006, expires Feb. 23, 2007. Amended: Filed Aug. 14, 2006.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE OF PUBLIC HEARING AND NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support or in opposition to this proposed rule with Thomas R. Piper, Director, Certificate of Need Program, PO Box 570, Jefferson City, MO 65102. To be considered, comments must be received by 12:00 p.m. (noon) on October 16, 2006. A public hearing has been scheduled for October 16, 2006, at 10:00 a.m. at the Certificate of Need Program Office located at the Jefferson State Office Building, Suite 1315, 205 Jefferson Street, Jefferson City, Missouri.

**Title 19—DEPARTMENT OF HEALTH AND
SENIOR SERVICES
Division 60—Missouri Health Facilities Review
Committee
Chapter 50—Certificate of Need Program**

PROPOSED AMENDMENT

19 CSR 60-50.410 Letter of Intent Package. This amendment modifies the address in sections (3) and (6).

PURPOSE: This rule is amended because SB 616 changed the category name of long-term care facilities and the Certificate of Need Program office was moved to a new physical location, changed its website address, and responded to a reorganization of the Department of Health and Senior Services.

(3) If an exemption is sought for *[an]* **a residential care or assisted living facility (RCF/ALF) [I or II]** pursuant to section 197.312, RSMo, applicants shall submit documentation that this facility had previously been owned or operated for or, on behalf of St. Louis City.

(6) The most current version of Forms MO 580-1860 and MO 580-2375 may be obtained by mailing a written request to the CONP, *[915G Leslie Boulevard]* **PO Box 570**, Jefferson City, MO 65101/12, or in person at the CONP Office, or, if technically feasible, by downloading a copy of the forms from the CONP website at *[www.dhss.state.mo.us/con]* **www.dhss.mo.gov/con**.

AUTHORITY: section 197.320, RSMo 2000. Emergency rule filed Aug. 29, 1997, effective Sept. 8, 1997, expired March 6, 1998. Original rule filed Aug. 29, 1997, effective March 30, 1998. For intervening history, please consult the Code of State Regulations. Emergency amendment filed Aug. 14, 2006, effective Aug. 28, 2006, expires Feb. 23, 2007. Amended: Filed Aug. 14, 2006.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE OF PUBLIC HEARING AND NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support or in opposition to this proposed amendment with Thomas R. Piper, Director, Certificate of Need Program, PO Box 570, Jefferson City, MO, 65102. To be considered, comments must be received by 12:00 p.m. (noon) on October 16, 2006. A public hearing has been scheduled for October 16, 2006, at 10:00 a.m. at the Certificate of Need Program Office located at the Jefferson State Office Building, Suite 1315, 205 Jefferson Street, Jefferson City, Missouri.

**Title 19—DEPARTMENT OF HEALTH AND
SENIOR SERVICES
Division 60—Missouri Health Facilities Review
Committee
Chapter 50—Certificate of Need Program**

PROPOSED AMENDMENT

19 CSR 60-50.430 Application Package. This amendment modifies the address in sections (4) and (6).

PURPOSE: This rule is amended because the Certificate of Need Program office was moved to a new physical location, changed its website address, and responded to a reorganization of the Department of Health and Senior Services.

(4) The Proposal Description shall include documents which:

(B) Describe the developmental details including:

1. A legible city or county map showing the exact location of the facility or health service, and a copy of the site plan showing the relation of the project to existing structures and boundaries;
2. Preliminary schematics for the project that specify the functional assignment of all space which will fit on an eight and one-half inch by eleven inch (8 1/2" × 11") format (not required for replacement equipment projects). The Certificate of Need Program (CONP)

staff may request submission of an electronic version of the schematics, when appropriate. The function for each space, before and after construction or renovation, shall be clearly identified and all space shall be assigned;

3. Evidence of submission of architectural plans to the Division of *[Senior Services and]* Regulation and Licensure, Department of Health and Senior Services, for long-term care projects and other facilities (not required for replacement equipment projects);

4. For long-term care proposals, existing and proposed gross square footage for the entire facility and for each institutional service or program directly affected by the project. If the project involves relocation, identify what will go into vacated space;

5. Documentation of ownership of the project site, or that the site is available through a signed option to purchase or lease; and

6. Proposals which include major and other medical equipment should include an equipment list with prices and documentation in the form of bid quotes, purchase orders, catalog prices, or other sources to substantiate the proposed equipment costs;

(C) Proposals for new hospitals, new or additional long-term care (LTC) beds, or new major medical equipment must define the community to be served:

1. Describe the service area(s) population using year 2010 populations and projections which are consistent with those provided by the Bureau of *[Health Data Analysis]* Informatics which can be obtained by contacting:

Chief, Bureau of *[Health Data Analysis]* Informatics
[Center for Health Information Management and Evaluation (CHIME)]

Section of Public Health Practice and Administrative Support (SPHPAS)

Division of Community and Public Health

Department of Health and Senior Services

PO Box 570, Jefferson City, MO 65102

Telephone: (573) *[751-6278]* 526-4805

There will be a charge for any of the information requested, and seven to fourteen (7-14) days should be allowed for a response from the *[CHIME]* SPHPAS. Information requests should be made to *[CHIME]* SPHPAS such that the response is received at least two (2) weeks before it is needed for incorporation into the CON application.

2. Use the maps and population data received from *[CHIME]* SPHPAS with the CON Applicant's Population Determination Method to determine the estimated population, as follows:

A. Utilize all of the population for zip codes entirely within the fifteen (15)-mile radius for LTC beds or geographic service area for hospitals and major medical equipment;

B. Reference a state highway map (or a map of greater detail) to verify population centers (see Bureau of *[Health Data Analysis information]* Informatics) within each zip code overlapped by the fifteen (15)-mile radius or geographic service area;

C. Categorize population centers as either "in" or "out" of the fifteen (15)-mile radius or geographic service area and remove the population data from each affected zip code categorized as "out";

D. Estimate, to the nearest ten percent (10%), the portion of the zip code area that is within the fifteen (15)-mile radius or geographic service area by "eyeballing" the portion of the area in the radius (if less than five percent (5%), exclude the entire zip code);

E. Multiply the remaining zip code population (total population less the population centers) by the percentage determined in (4)(C)2.D. (due to numerous complexities, population centers will not be utilized to adjust overlapped zip code populations in Jackson, St. Louis, and St. Charles counties or St. Louis City; instead, the total population within the zip code will be considered uniform and multiplied by the percentage determined in (4)(C)2.D.);

F. Add back the population center(s) "inside" the radius or region for zip codes overlapped; and

G. The sum of the estimated zip codes, plus those entirely within the radius, will equal the total population within the fifteen (15)-mile radius or geographic service area.

3. Provide other statistics, such as studies, patient origin or discharge data, Hospital Industry Data Institute's information, or con-

sultants' reports, to document the size and validity of any proposed user-defined "geographic service area";

(6) The most current version of Forms MO 580-2501, MO 580-2502, MO 580-2503, MO 580-2504, MO 580-2505, MO 580-1861, MO 580-1869 and MO 580-1863 may be obtained by mailing a written request to the Certificate of Need Program (CONP), *[915G Leslie Boulevard]* PO Box 570, Jefferson City, MO 65101/1/2, or in person at the CONP Office, or, if technically feasible, by downloading a copy of the forms from the CONP website at *[www.dhss.state.mo.us/con]* www.dhss.mo.gov/con.

AUTHORITY: section 197.320, RSMo 2000. Emergency rule filed Aug. 29, 1997, effective Sept. 8, 1997, expired March 6, 1998. Original rule filed Aug. 29, 1997, effective March 30, 1998. For intervening history, please consult the Code of State Regulations. Emergency amendment filed Aug. 14, 2006, effective Aug. 28, 2006, expires Feb. 23, 2007. Amended: Filed Aug. 14, 2006.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE OF PUBLIC HEARING AND NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support or in opposition to this proposed amendment with Thomas R. Piper, Director, Certificate of Need Program, PO Box 570, Jefferson City, MO, 65102. To be considered, comments must be received by 12:00 p.m.(noon) on October 16, 2006. A public hearing has been scheduled for October 16, 2006, at 10:00 a.m. at the Certificate of Need Program Office located at the Jefferson State Office Building, Suite 1315, 205 Jefferson Street, Jefferson City, Missouri.

**Title 19—DEPARTMENT OF HEALTH
SENIOR SERVICES
Division 60—Missouri Health Facilities Review
Committee
Chapter 50—Certificate of Need Program**

PROPOSED AMENDMENT

19 CSR 60-50.450 Criteria and Standards for Long-Term Care.
This amendment modifies the address in sections (1), (2), (3), (7) and (9).

PURPOSE: This rule is amended because SB 616 changed the category name of long-term care facilities, the Certificate of Need Program office was moved to a new physical location, changed its website address, and responded to a reorganization of the Department of Health and Senior Services.

(1) All additional long-term care (LTC) beds in nursing homes, hospitals, *[and]* residential care facilities and assisted living facilities (RCF/ALF), and beds in long-term acute hospitals are subject to the LTC bed minimum occupancy requirements (MOR) pursuant to sections 197.317 and 197.318(1), RSMo, with certain exemptions and exceptions pursuant to sections 197.305(7) and 197.312, RSMo, and LTC bed expansions and replacements pursuant to sections 197.318.8 through 197.318.10, RSMo.

(2) The MOR for additional LTC beds pursuant to section 197.318.1, RSMo, shall be met if the average occupancy for all licensed and available LTC beds located within the county and within fifteen (15) miles of the proposed site exceeded ninety percent (90%) during at least each of the most recent four (4) consecutive calendar quarters at the time of application filing as reported in the Division of

[*Health Standards and*] **Regulation and Licensure (DHSL/DRL)**, Department of Health and Senior Services, Quarterly Survey of Hospital and Nursing Home (or Residential Care Facility **and Assisted Living**) Bed Utilization and certified through a written finding by the *[DHSL/DRL]*, in which case the following population-based long-term care bed need methodology for the fifteen (15)-mile radius shall be used to determine the maximum size of the need:

(B) Approval of additional RCF/ALF beds will be based on a service area need determined to be sixteen (16) beds per one thousand (1,000) population age sixty-five (65) and older minus the current supply of RCF/ALF beds shown in the Inventory of Residential Care **and Assisted Living** Facility Beds as provided by the CONP which includes licensed and CON-approved beds.

(3) Replacement Chapter 198 beds qualify for an exception to the LTC bed MOR plus shortened information requirements and review time frames if an applicant proposes to—

(A) Relocate RCF/ALF beds within a six (6)-mile radius pursuant to section 197.318.8(4), RSMo;

(7) Any newly-licensed Chapter 198 facility established as a result of the Alzheimer's and dementia demonstration projects pursuant to Chapter 198, RSMo, or aging-in-place pilot projects pursuant to Chapter 198, RSMo, as implemented by the *[DHSL/DRL]*, may be licensed by the *[DHSL/DRL]* until the completion of each project. If a demonstration or pilot project receives a successful evaluation from the *[DHSL/DRL]* and a qualified Missouri school or university, and meets the *[DHSL/DRL]* standards for licensure, this will ensure continued licensure without a new CON.

(9) The most current version of Form MO 580-2352 may be obtained by mailing a written request to the CONP, *[915G Leslie Boulevard] PO Box 570*, Jefferson City, MO 65101/2, or in person at the CONP Office, or, if technically feasible, by downloading a copy of the forms from the CONP website at *[www.dhss.state.mo.us/con]* **www.dhss.mo.gov/con**.

AUTHORITY: section 197.320, RSMo 2000. Emergency rule filed Aug. 29, 1997, effective Sept. 8, 1997, expired March 6, 1998. Original rule filed Aug. 29, 1997, effective March 30, 1998. For intervening history, please consult the Code of State Regulations. Emergency amendment filed Aug. 14, 2006, effective Aug. 28, 2006, expires Feb. 23, 2007. Amended: Filed Aug. 14, 2006.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE OF PUBLIC HEARING AND NOTICE TO SUBMIT COMMENTS: *Anyone may file a statement in support or in opposition to this proposed amendment with Thomas R. Piper, Director, Certificate of Need Program, PO Box 570, Jefferson City, MO 65102. To be considered, comments must be received by 12:00 p.m. (noon) on October 16, 2006. A public hearing has been scheduled for October 16, 2006, at 10:00 a.m. at the Certificate of Need Program Office located at the Jefferson State Office Building, Suite 1315, 205 Jefferson Street, Jefferson City, Missouri.*

**Title 19—DEPARTMENT OF HEALTH AND
SENIOR SERVICES
Division 60—Missouri Health Facilities Review
Committee
Chapter 50—Certificate of Need Program**

PROPOSED AMENDMENT

19 CSR 60-50.470 Criteria and Standards for Financial Feasibility. This amendment modifies the address in sections (1) and (5).

PURPOSE: This rule is amended because SB 616 changed the category name of long-term care facilities, the Certificate of Need Program office was moved to a new physical location, and changed its website address.

(1) Proposals for any new hospital, nursing home, *[or]* residential care facility, **or assisted living facility** construction must include documentation that the proposed costs per square foot are reasonable when compared to the latest "RS Means Construction Cost Data" available from Certificate of Need Program (CONP). Any proposal with costs in excess of the three-fourths (3/4) percentile must include justification for the higher costs.

(5) The most current version of Forms MO 580-1865 and MO 580-1866 may be obtained by mailing a written request to the *[Certificate of Need Program] [CONP]*, *[915G Leslie Boulevard] PO Box 570*, Jefferson City, MO 65101/2, or in person at the CONP Office, or, if technically feasible, by downloading a copy of the forms from the CONP website at *[www.dhss.state.mo.us/con]* **www.dhss.mo.gov/con**.

AUTHORITY: section 197.320, RSMo 2000. Emergency rule filed Aug. 29, 1997, effective Sept. 8, 1997, expired March 6, 1998. Original rule filed Aug. 29, 1997, effective March 30, 1998. For intervening history, please consult the Code of State Regulations. Emergency amendment filed Aug. 14, 2006, effective Aug. 28, 2006, expires Feb. 23, 2007. Amended: Filed Aug. 14, 2006.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE OF PUBLIC HEARING AND NOTICE TO SUBMIT COMMENTS: *Anyone may file a statement in support or in opposition to this proposed amendment with Thomas R. Piper, Director, Certificate of Need Program, PO Box 570, Jefferson City, MO 65102. To be considered, comments must be received by 12:00 p.m. (noon) on October 16, 2006. A public hearing has been scheduled for October 16, 2006, at 10:00 a.m. at the Certificate of Need Program Office located at the Jefferson State Office Building, Suite 1315, 205 Jefferson Street, Jefferson City, Missouri.*

**Title 19—DEPARTMENT OF HEALTH AND
SENIOR SERVICES
Division 60—Missouri Health Facilities Review
Committee
Chapter 50—Certificate of Need Program**

PROPOSED AMENDMENT

19 CSR 60-50.600 Certificate of Need Decisions. This amendment modifies section (1).

PURPOSE: This rule is amended because the Certificate of Need Program office has updated to use of the latest edition of parliamentary procedures.

(1) Decisions on full Certificate of Need (CON) applications and contested expedited applications shall be subject to the following:

(A) Parliamentary procedures for all meetings shall follow *Robert's Rules of Order*, newly revised [1990] 2000 edition, [9/10th edition.

AUTHORITY: section 197.320, RSMo 2000. Original rule filed June 2, 1994, effective Nov. 30, 1994. For intervening history, please consult the *Code of State Regulations*. Emergency amendment filed Aug. 14, 2006, effective Aug. 28, 2006, expires Feb. 23, 2007. Amended: Filed Aug. 14, 2006.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE OF PUBLIC HEARING AND NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support or in opposition to this proposed amendment with Thomas R. Piper, Director, Certificate of Need Program, PO Box 570, Jefferson City, MO 65102. To be considered, comments must be received by 12:00 p.m. (noon) on October 16, 2006. A public hearing has been scheduled for October 16, 2006, at 10:00 a.m. at the Certificate of Need Program Office located at the Jefferson State Office Building, Suite 1315, 205 Jefferson Street, Jefferson City, Missouri.

**Title 19—DEPARTMENT OF HEALTH AND
SENIOR SERVICES
Division 60—Missouri Health Facilities Review
Committee
Chapter 50—Certificate of Need Program**

PROPOSED AMENDMENT

19 CSR 60-50.700 Post-Decision Activity. This amendment modifies the address in section (10).

PURPOSE: This rule is amended because the Certificate of Need Program office was moved to a new physical location, and changed its website address.

(10) The most current version of Forms MO 580-1871, MO 580-1863, and MO 580-1870 may be obtained by mailing a written request to the CONP, [915G Leslie Boulevard] PO Box 570, Jefferson City, MO 65101/1/2, or in person at the CONP Office, or, if technically feasible, by downloading a copy of the forms from the CONP website at [www.dhss.state.mo.us/conp] www.dhss.mo.gov/con.

AUTHORITY: section 197.320, RSMo 2000. Original rule filed June 2, 1994, effective Nov. 30, 1994. For intervening history, please consult the *Code of State Regulations*. Emergency amendment filed Aug. 14, 2006, effective Aug. 28, 2006, expires Feb. 23, 2007. Amended: Filed Aug. 14, 2006.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE OF PUBLIC HEARING AND NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support or in opposition to this proposed amendment with Thomas R. Piper, Director, Certificate of Need Program, PO Box 570, Jefferson City, MO 65102. To be con-

sidered, comments must be received by 12:00 p.m. (noon) on October 16, 2006. A public hearing has been scheduled for October 16, 2006, at 10:00 a.m. at the Certificate of Need Program Office located at the Jefferson State Office Building, Suite 1315, 205 Jefferson Street, Jefferson City, Missouri.

**Title 19—DEPARTMENT OF HEALTH AND
SENIOR SERVICES
Division 60—Missouri Health Facilities Review
Committee
Chapter 50—Certificate of Need Program**

PROPOSED AMENDMENT

19 CSR 60-50.800 Meeting Procedures. This amendment modifies the address in section (7).

PURPOSE: This rule is amended because the Certificate of Need Program office was moved to a new physical location and changed its website address.

(7) The most current version of Form MO 580-1869 may be obtained by mailing a written request to the CONP, [915G Leslie Boulevard] PO Box 570, Jefferson City, MO 65101/1/2, or in person at the CONP Office, or, if technically feasible, by downloading a copy of the form from the CONP website at [www.dhss.state.mo.us/conp] www.dhss.mo.gov/con.

AUTHORITY: section 197.320, RSMo 2000. Original rule filed June 2, 1994, effective Nov. 30, 1994. For intervening history, please consult the *Code of State Regulations*. Emergency amendment filed Aug. 14, 2006, effective Aug. 28, 2006, expires Feb. 23, 2007. Amended: Filed Aug. 14, 2006.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE OF PUBLIC HEARING AND NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support or in opposition to this proposed amendment with Thomas R. Piper, Director, Certificate of Need Program, PO Box 570, Jefferson City, MO 65102. To be considered, comments must be received by 12:00 p.m. (noon) on October 16, 2006. A public hearing has been scheduled for October 16, 2006, at 10:00 a.m. at the Certificate of Need Program Office located at the Jefferson State Office Building, Suite 1315, 205 Jefferson Street, Jefferson City, Missouri.

**Title 19—DEPARTMENT OF HEALTH AND
SENIOR SERVICES
Division 60—Missouri Health Facilities Review
Committee
Chapter 50—Certificate of Need Program**

PROPOSED AMENDMENT

19 CSR 60-50.900 Administration. This amendment modifies section (6).

PURPOSE: This rule is amended because the Certificate of Need Program updated to Internet information posting after its office was moved to a new physical location.

(6) The committee and CONP staff shall *[publish quarterly reports]* **post information on the CONP website** containing the status of reviews being conducted, the reviews completed since the last report, and the decisions made, plus an annual summary of activities for the past calendar year.

AUTHORITY: section 197.320, RSMo 2000. Original rule filed June 2, 1994, effective Nov. 30, 1994. For intervening history, please consult the **Code of State Regulations**. Emergency amendment filed Aug. 14, 2006, effective Aug. 28, 2006, expires Feb. 23, 2007. Amended: Filed Aug. 14, 2006.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE OF PUBLIC HEARING AND NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support or in opposition to this proposed amendment with Thomas R. Piper, Director, Certificate of Need Program, PO Box 570, Jefferson City, MO 65102. To be considered, comments must be received by 12:00 p.m. (noon) on October 16, 2006. A public hearing has been scheduled for October 16, 2006, at 10:00 a.m. at the Certificate of Need Program Office located at the Jefferson State Office Building, Suite 1315, 205 Jefferson Street, Jefferson City, Missouri.

**Title 20—DEPARTMENT OF INSURANCE,
FINANCIAL INSTITUTIONS AND PROFESSIONAL
REGISTRATION**

**Division 200—Financial Examination
Chapter 6—Surplus Lines**

PROPOSED AMENDMENT

20 CSR 200-6.300 Surplus Lines Insurance Fees and Taxes. The department is amending sections (1), (2) and (3) of this rule.

PURPOSE: This amendment clarifies that any fee charged in connection with the placement of surplus lines insurance is subject to the surplus lines insurance premium tax, regardless of whether the fee is charged by the surplus lines insurer or the surplus lines licensee. As such the amendment is consistent with current practice of the department and is intended to halt the avoidance of tax by merely shifting the stated source of fees from the insurer to the licensee.

(1) For purposes of determining net premiums, as that term is used in sections 384.051, 384.057 and 384.059, RSMo, the gross amount of charges for surplus lines insurance shall include any fee charged to the insured and paid to the surplus lines insurer **or licensee** for the placement of the surplus lines insurance.

(2) The fees may include, but are not limited to, policy fees, inspection fees, fees charged by an insurance producer acting as a managing general agent for a surplus lines insurer or any other fee charged by surplus lines insurer **or licensee** for the placement of surplus lines insurance.

(3) All fees charged to the insured by the surplus lines insurer **or licensee** shall be considered premium for purposes of the premium tax imposed by sections 384.051 and 384.059, RSMo.

AUTHORITY: sections 374.045, 384.051, 384.057 and 384.059, RSMo 2000. This rule was previously filed as 4 CSR 190-10.105. Original rule filed Jan. 17, 1990, effective June 11, 1990. Amended:

Filed Sept. 24, 1991, effective Feb. 6, 1992. Amended: Filed July 12, 2002, effective Jan. 30, 2003. Amended: Filed Aug. 10, 2006.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE OF PUBLIC HEARING AND NOTICE TO SUBMIT COMMENTS: A public hearing will be held on this proposed amendment at 10:00 a.m. on October 24, 2006. The public hearing will be held at the Harry S Truman State Office Building, 301 West High Street, Room 530, Jefferson City, Missouri. Opportunities to be heard at the hearing shall be afforded to any interested person. Interested persons, whether or not heard, may submit a written statement in support of or in opposition to the proposed amendment, until 5:00 p.m. on October 24, 2006. Written statements shall be sent to Stephen Gleason, Department of Insurance, PO Box 690, Jefferson City, MO 65102.

SPECIAL NEEDS: If you have any special needs addressed by the Americans With Disabilities Act, please notify us at (573) 751-6798 or (573) 751-2619 at least five (5) working days prior to the hearing.

This section will contain the final text of the rules proposed by agencies. The order of rulemaking is required to contain a citation to the legal authority upon which the order of rulemaking is based; reference to the date and page or pages where the notice of proposed rulemaking was published in the *Missouri Register*; an explanation of any change between the text of the rule as contained in the notice of proposed rulemaking and the text of the rule as finally adopted, together with the reason for any such change; and the full text of any section or subsection of the rule as adopted which has been changed from that contained in the notice of proposed rulemaking. The effective date of the rule shall be not less than thirty (30) days after the date of publication of the revision to the *Code of State Regulations*.

The agency is also required to make a brief summary of the general nature and extent of comments submitted in support of or opposition to the proposed rule and a concise summary of the testimony presented at the hearing, if any, held in connection with the rulemaking, together with a concise summary of the agency's findings with respect to the merits of any such testimony or comments which are opposed in whole or in part to the proposed rule. The ninety (90)-day period during which an agency shall file its order of rulemaking for publication in the *Missouri Register* begins either: 1) after the hearing on the proposed rulemaking is held; or 2) at the end of the time for submission of comments to the agency. During this period, the agency shall file with the secretary of state the order of rulemaking, either putting the proposed rule into effect, with or without further changes, or withdrawing the proposed rule.

Title 3—DEPARTMENT OF CONSERVATION Division 10—Conservation Commission Chapter 10—Wildlife Code: Commercial Permits: Seasons, Methods, Limits

ORDER OF RULEMAKING

By the authority vested in the Conservation Commission under sections 40 and 45 of Art. IV, Mo. Const., the commission amends a rule as follows:

3 CSR 10-10.722 Resident Shovelnose Sturgeon Commercial Harvest Permit is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on July 3, 2006 (31 MoReg 973). No changes have been made in the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

Title 4—DEPARTMENT OF ECONOMIC DEVELOPMENT Division 240—Public Service Commission Chapter 13—Service and Billing Practices for Residential Customers of Electric, Gas and Water Utilities

ORDER OF RULEMAKING

By the authority vested in the Public Service Commission under section 386.250(6), RSMo 2000, the commission amends a rule as follows:

4 CSR 240-13.055 is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on June 15, 2006 (31 MoReg 902-905). Those sections with changes are reprinted here. This proposed amendment becomes effective **November 1, 2006**.

SUMMARY OF COMMENTS: A public hearing on this proposed amendment was held July 19, 2006, and the public comment period ended July 27, 2006, the record having been held open for additional information discussed at the public hearing. Five (5) sets of written comments were received and an additional person commented at the hearing. Written comments were received from AARP; Laclede Gas Company, Missouri Gas Energy, and Atmos Energy Corporation, who collectively filed as the "Missouri Utilities"; the Office of the Public Counsel; Mid America Assistance Coalition (MAAC); and Jackie Hutchinson on behalf of the Human Development Corporation and other social welfare groups. Each of those persons or groups commented at the hearing, in addition to which three (3) witnesses testified on behalf of the Staff of the Missouri Public Service Commission. The commenters suggested changes to subsections (14)(A), (14)(F) and (14)(G).

COMMENT: All commenters suggested that the dates of applicability of the amendment be changed from December 1 to November 1 to make the amendment consistent with the other sections of the Cold Weather Rule.

RESPONSE AND EXPLANATION OF CHANGE: The commission finds that the rule shall be changed so that it applies on November 1 of each year, consistent with the other sections of the Cold Weather Rule, as more fully set out below.

COMMENT: The Public Counsel seeks to limit the fifty percent (50%) arrearage repayment requirement for reinstatement of service to fifty percent (50%) or two hundred fifty dollars (\$250), whichever is less. This limit is supported by other commenters, including generally by MAAC, although it points out that lowering the arrearage repayment for restoration allows households to acquire a debt burden from which there is no hope of repaying; MAAC supports a limit at five hundred dollars (\$500) or fifty percent (50%); Ms. Hutchinson would go as low as twenty-five percent (25%) with a two hundred fifty dollar (\$250) limit, although only for families at or below one hundred eighty-five percent (185%) of the federal poverty guideline. The Missouri Utilities oppose a dollar limit on arrearage repayment.

RESPONSE AND EXPLANATION OF CHANGE: The commission finds that the rule shall be changed so that it limits the amount a customer must pay to be reconnected to five hundred dollars (\$500) or fifty percent (50%), whichever is less, as more fully set out below.

COMMENT: The commenters differed over the following language in (14)(A): "However, a gas utility shall not be required to offer reconnection or retention of service under this subsection (14)(A) more than once for any customer." The utility commenters initially sought clarification that the obligations under (14) applied only once in a customer's lifetime, but later revised its position that the obligations should be applied once every five (5) years. Other commenters asserted that every two (2) or three (3) years would be sufficient, while other commenters asserted that the obligation should apply once every year.

RESPONSE AND EXPLANATION OF CHANGE: The commission finds that the rule shall be changed so that it clarifies that the

protections of section (14) shall be available to customers once every two (2) years, but that a customer who has failed to adhere to payment plans under the rule three (3) times is not eligible for another such payment plan, as more fully set out below.

COMMENT: The commenters differed over how long the payment plans should last. Certain commenters believed it was appropriate for the payment plans to be extended for two (2) or three (3) years, as customers in unusual circumstances, such as those with large medical bills, might need a longer period to pay all arrearages. In addition, there were comments that LIHEAP-eligible customers should be given longer repayment periods. Other commenters believe that payment plans longer than twelve (12) months cause customers in financial difficulty to become further indebted to the extent that they may never be able to eliminate their arrearages.

RESPONSE AND EXPLANATION OF CHANGE: The commission finds that both sides of the argument have merit, and that the rule shall be clarified that payment plans are to be for twelve (12) months unless the customer seeks a shorter period or the utility agrees to a longer period for customers in unusual circumstances, as more fully set out below.

COMMENT: The Missouri Utilities sought the inclusion of the following language at the end of (14)(A): "For purposes of this paragraph any offer made by the gas utility as a result of the emergency amendment adopted by the commission effective January 1, 2006 or by the gas utility at any time subsequent to the effective date of this amendment shall be deemed to satisfy its obligations under this subsection (14)(A)."

RESPONSE: The inclusion of this language was not discussed at the hearing, nor was the need for such language addressed in Missouri Utilities' written comments. The emergency amendment was substantively identical to the proposed amendment; the commission does not believe the inclusion of this language is warranted. Therefore, no change in the language of the rule will be made.

COMMENT: The Missouri Utilities sought the inclusion of the following language in its new subsection (F): "A gas utility shall be permitted to apply any income eligibility requirements approved by the Commission pursuant to section (13) of this rule to customers seeking to take advantage of the payment terms set forth in this section, provided that on and after the effective date of this amendment the minimum [sic] household income percentage for determining eligibility shall be increased to 185% of the federal poverty level."

RESPONSE: The application of an income threshold for eligibility for the protections of this section were discussed at length in the hearing and in written comments. Other commenters noted that the potential harm of disconnection and the need for a repayment plan are not necessarily limited to those households that have income of less than one hundred fifty percent (150%) of the federal poverty guideline. Although Missouri Utilities have proposed a higher maximum household income, the commission does not believe the inclusion of this language is warranted. Therefore, no change in the language of the rule will be made.

COMMENT: The MAAC supports inclusion in the rule of some sort of weatherization plan or incentives to assist low-income customers in reducing their energy usage and bills.

RESPONSE: While the commission believes that weatherization and usage-reduction incentives are a good idea, the commission has chosen to pursue those plans in other dockets, in other ways. Therefore, no change in the language of the rule will be made.

COMMENT: Both Ms. Hutchinson and MAAC request that some sort of arrearage forgiveness program would provide incentive for customers to make realistic payment plans and then adhere to them.

RESPONSE: While such an arrearage forgiveness program could provide such an incentive and reduce the overall uncollectibles facing

Missouri Utilities, such a program is beyond the scope of this rule at this time. Therefore, no change in the language of the rule will be made. However, the commission encourages companies to work with the other commenters in this matter to determine whether an experimental program along these lines is feasible.

COMMENT: The most contentious issue among the commenters was the cost recovery mechanism. The Public Counsel opposes the inclusion of the accounting authority order ("AAO") while the Missouri Utilities do not believe that the AAO provides sufficient protection. The Missouri Utilities propose deletion of (14)(F), which sets out limits on the recovery of costs associated with the amendment to those costs actually caused by the amendment, and propose a new (14)(G) that would establish an "Uncollectibles Tracker" mechanism to recover costs. Staff and Public Counsel oppose the tracker mechanism due to their belief that, especially in light of the Missouri Utilities' removal of (14)(F) recovery limitations, the tracking mechanism would recover costs not associated with compliance with this amendment.

RESPONSE AND EXPLANATION OF CHANGE: The proposal by the Missouri Utilities is too broad. On its face, the proposal allows the recovery of costs not associated with compliance with this amendment. Although the commission has lawfully used such mechanisms in the past, it does not appear to be an appropriate resolution of this matter. However, the Missouri Utilities do raise a valid point concerning the ability to recover all of the costs associated with compliance with this rule, because in a full rate case all of the costs of doing business as a utility are reviewed and certain costs could be disallowed in that overall review. Therefore, the commission will adopt a more detailed AAO in which the amount to be recovered will be determined in a separate proceeding concerning only the costs of complying with this amendment, as more fully set out below in (14)(F) and (G).

4 CSR 240-13.055 Cold Weather Maintenance of Service: Provision of Residential Heat-Related Utility Service During Cold Weather

(14) This section only applies to providers of natural gas services to residential customers. Other providers of heat-related utility services will continue to provide such service under the terms of sections (1) through (13) of this rule. The provisions of sections (1) through (13) of this rule continue to apply to providers of natural gas service except where inconsistent with the terms of this section.

(A) From November 1 through March 31, notwithstanding paragraph (10)(C)2. of this rule to the contrary, a gas utility shall restore service upon initial payment of the lesser of fifty percent (50%) or five hundred dollars (\$500) of the preexisting arrears, with the deferred balance to be paid as provided in subsection (10)(B). Any reconnection fee, trip fee, collection fee or other fee related to reconnection, disconnection or collection shall also be deferred. Between November 1 and March 31, any customer threatened with disconnection may retain service by entering into a payment plan as described in this section. Any payment plan entered into under this section shall remain in effect (as long as its terms are adhered to) for the term of the payment plan, which shall be twelve (12) months' duration, unless the customer requests a shorter period or the utility agrees to a longer period. However, a gas utility shall not be required to offer reconnection or retention of service under this subsection (14)(A) more than once every two (2) years for any customer or to any customer who has defaulted on a payment plan under this section three (3) or more times.

(F) A gas utility shall be permitted to recover the costs of complying with this section as follows:

1. The cost of compliance with this section shall include any reasonable costs incurred to comply with the requirements of this section;

2. No gas utility shall be permitted to recover costs under this

section that would have been incurred in the absence of this section, provided that the costs calculated in accordance with paragraph (14)(F)1. shall be considered costs of complying with this section;

3. Any net cost resulting from this section as of June 30 each year shall accumulate interest at the utility's annual short-term borrowing rate until such times as it is recovered in rates; and

4. No bad debts accrued prior to the effective date of this section may be included in the costs to be recovered under this section, provided that a gas utility may continue to calculate and defer for recovery through a separate Accounting Authority Order the costs of complying with the commission's January 1, 2006 emergency amendment to this rule upon the same terms as set forth herein. The costs eligible for recovery shall be the unpaid charges for new service received by the customer subsequent to the time the customer is retained or reconnected by virtue of this section plus the unpaid portion of the difference between the initial payment paid under this section and the initial payment that could have been required from the customer under the previously enacted payment provisions of section (10) of this rule, as measured at the time of a subsequent disconnection for nonpayment or expiration of the customer's payment plan.

(G) A gas utility shall be permitted to defer and recover the costs of complying with this rule through a one (1)-term Accounting Authority Order until such time as the compliance costs are included in rates as part of the next general rate proceeding or for a period of two (2) years following the effective date of this amendment:

1. The commission shall grant an Accounting Authority Order, as defined below, upon application of a gas utility, and the gas utility may book to Account 186 for review, audit and recovery all incremental expenses incurred and incremental revenues that are caused by this section. Any such Accounting Authority Order shall be effective until September 30, of each year for the preceding winter;

2. Between September 30 and October 31 each year, if a utility intends to seek recovery of any of the cost of compliance with this section, the utility shall file a request for determination of the cost of compliance with this section for the preceding winter season. The request by the utility shall include all supporting information. All parties to this filing will have no longer than one hundred twenty (120) days from the date of such a filing to submit to the commission their position regarding the company's request with all supporting evidence. The commission shall hold a proceeding where the utility shall present all of its evidence concerning the cost of compliance and other parties, including commission staff, shall present any evidence that the costs asserted by the utility should be disallowed in whole or part. Such a proceeding may be waived by the unanimous request of the parties or by a non-unanimous request without objection. The commission shall establish the amount of costs it determines have been reasonably incurred in complying with this section within one hundred eighty (180) days of the utility's request and such amount will be carried forward into the utility's next rate case without reduction or alteration. Such costs shall be amortized in rates over a period of no greater than five (5) years and shall be recovered in a manner that does not impair the utility's ability to recover other costs of providing utility service. If the commission fails to establish the amount of costs within one hundred eighty (180) days, then the amount requested by the utility shall be deemed reasonably incurred.

3. The commission has adopted the Uniform System of Accounts in 4 CSR 240-4.040. Accounting Authority Orders are commission orders that allow a utility to defer certain expenses to Account 186 under the Uniform System of Accounts for later recovery as determined by the commission in a subsequent general rate case; and

4. Although the Accounting Authority Order allows the gas utility to recover the reasonably incurred expenses only within the context of a general rate case, all such reasonably incurred expenses shall be recovered by the gas utility, together with interest thereon, as set forth above.

**Title 20—DEPARTMENT OF INSURANCE,
FINANCIAL INSTITUTIONS AND
PROFESSIONAL REGISTRATION
Division 200—Financial Examination
Chapter 11—Control and Management of Insurance
Companies**

ORDER OF RULEMAKING

By the authority vested in the director of the Missouri Department of Insurance, Financial Institutions and Professional Registration under section 374.045, RSMo 2000, the director amends a rule as follows:

**20 CSR 200-11.101 Insurance Holding Company System
Regulation with Reporting Forms and Instructions is amended.**

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on May 15, 2006 (31 MoReg 776-784). No changes have been made in the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: A public hearing on this proposed amendment was held June 20, 2006, and the public comment period ended June 20, 2006. At the public hearing, the Department of Insurance staff explained the proposed amendment and no comments were received.

This section may contain notice of hearings, correction notices, public information notices, rule action notices, statements of actual costs and other items required to be published in the *Missouri Register* by law.

**Title 7—DEPARTMENT OF TRANSPORTATION
Division 10—Missouri Highways and
Transportation Commission
Chapter 25—Motor Carrier Operations**

IN ADDITION

**7 CSR 10-25.010 Skill Performance Evaluation Certificates for
Commercial Drivers**

PUBLIC NOTICE

Public Notice and Request for Comments on Applications for Issuance of Skill Performance Evaluation Certificates to Intrastate Commercial Drivers with Diabetes Mellitus or Impaired Vision

SUMMARY: This notice publishes MoDOT's receipt of applications for the issuance of Skill Performance Evaluation (SPE) Certificates, from individuals who do not meet the physical qualification requirements in the Federal Motor Carrier Safety Regulations for drivers of commercial motor vehicles in Missouri intrastate commerce, because of impaired vision, or an established medical history or clinical diagnosis of diabetes mellitus currently requiring insulin for control. If granted, the SPE Certificates will authorize these individuals to qualify as drivers of commercial motor vehicles (CMVs), in intrastate commerce only, without meeting the vision standard prescribed in 49 CFR 391.41(b)(10), if applicable, or the diabetes standard prescribed in 49 CFR 391.41(b)(3).

DATES: Comments must be received at the address stated below, on or before October 15, 2006.

ADDRESSES: You may submit comments concerning an applicant, identified by the Application Number stated below, by any of the following methods:

- E-mail:* Kathy.Hatfield@modot.mo.gov
- Mail:* PO Box 893, Jefferson City, MO 65102-0893
- Hand Delivery:* 1320 Creek Trail Drive, Jefferson City, MO 65109
- Instructions:* All comments submitted must include the agency name and Application Number for this public notice. For detailed instructions on submitting comments, see the Public Participation heading of the Supplementary Information section of this notice. All comments received will be open and available for public inspection and MoDOT may publish those comments by any available means.

**COMMENTS RECEIVED
BECOME MoDOT PUBLIC RECORD**

- By submitting any comments to MoDOT, the person authorizes MoDOT to publish those comments by any available means.
- Docket:* For access to the department's file, to read background documents or comments received, 1320 Creek Trail Drive, Jefferson City, MO 65109, between 7:30 a.m. and 4:00 p.m., Monday through Friday, except state holidays.

FOR FURTHER INFORMATION CONTACT: Ms. Kathy Hatfield, Motor Carrier Specialist, (573) 522-9001, MoDOT Motor Carrier Services Division, PO Box 893, Jefferson City, MO 65102-

0893. Office hours are from 7:30 a.m. to 4:00 p.m., CT, Monday through Friday, except state holidays.

SUPPLEMENTARY INFORMATION:

Public Participation

If you want us to notify you that we received your comments, please include a self-addressed, stamped envelope or postcard.

Background

The individuals listed in this notice have recently filed applications requesting MoDOT to issue SPE Certificates to exempt them from the physical qualification requirements relating to vision in 49 CFR 391.41(b)(10), or to diabetes in 49 CFR 391.41(b)(3), which otherwise apply to drivers of CMVs in Missouri intrastate commerce.

Under section 622.555, *Missouri Revised Statutes* (RSMo) Supp. 2005, MoDOT may issue a Skill Performance Evaluation Certificate, for not more than a two (2)-year period, if it finds that the applicant has the ability, while operating CMVs, to maintain a level of safety that is equivalent to or greater than the driver qualification standards of 49 CFR 391.41. Upon application, MoDOT may renew an exemption upon expiration.

Accordingly, the agency will evaluate the qualifications of each applicant to determine whether issuing a SPE Certificate will comply with the statutory requirements and will achieve the required level of safety. If granted, the SPE Certificate is only applicable to intrastate transportation wholly within Missouri.

Qualifications of Applicants

Application # MP051128059

Applicant's Name & Age: Mark E. Thomas, 26
Relevant Physical Condition: Mr. Thomas's best-corrected visual acuity in his right eye is 20/15 Snellen and in his left eye is 20/200 Snellen. He has been diagnosed with amblyopia in his left eye. This has been a life-long impairment.
Relevant Driving Experience: Mr. Thomas has no current commercial driving experience. He has been employed with Complete Vegetation Management, Inc., Jefferson City, MO since March, 2005. Previous employment has not been related to driving a commercial motor vehicle. He currently has a Class B CDL. Drives personal vehicle(s) daily.
Doctor's Opinion & Date: Following an examination in February 2006, his ophthalmologist certified, "In my medical opinion, Mr. Thomas's visual deficiency is stable and he is capable of performing the driving tasks required to operate a commercial motor vehicle, and that his condition will not adversely affect his ability to operate a commercial motor vehicle safely."
Traffic Accidents and Violations: 1 accident in May 2005 on a motorcycle and 4 violations in September 2003, not in a commercial motor vehicle.

Request for Comments

The Missouri Department of Transportation, Motor Carrier Services Division, pursuant to section 622.555, RSMo, and rule 7 CSR 10-25.010, requests public comment from all interested persons on the applications for issuance of Skill Performance Evaluation Certificates described in this notice. We will consider all comments received before the close of business on the closing date indicated earlier in this notice.

Issued on: August 15, 2006

Jan Skouby, Motor Carrier Services Director, Missouri Department of Transportation.

**Title 19—DEPARTMENT OF HEALTH AND
SENIOR SERVICES
Division 60—Missouri Health Facilities Review Committee
Chapter 50—Certificate of Need Program**

EXPEDITED APPLICATION REVIEW SCHEDULE

The Missouri Health Facilities Review Committee has initiated review of the Expedited applications listed below. A decision is tentatively scheduled for September 21, 2006. These applications are available for public inspection at the address shown below:

Date Filed

Project Number: Project Name
City (County)
Cost, Description

08/04/06

#3919 HS: St. John's Regional Medical Center
Joplin (Jasper County)
\$1,665,000, Replace computerized tomography unit

#3967 HS: St. John's Regional Medical Center
Joplin (Jasper County)
\$2,312,000, Replace linear accelerator

08/10/06

#3971 NP: Beauvais Manor on the Park
St. Louis (St. Louis City)
\$210,000, Long-term care bed expansion through the purchase of 38 skilled nursing facility (SNF) beds from Chesterfield Manor, Chesterfield (St. Louis County)

#3973 NS: Ashfield Active Living and Wellness Communities
Kirkwood (St. Louis County)
\$12,000,000, Replace 53 SNF beds

#3977 HS: St. Anthony's Medical Center
St. Louis (St. Louis County)
\$1,343,523, Replace cardiac catheterization unit

#3970 HS: Fitzgibbon Hospital
Marshall (Saline County)
\$1,542,615, Replace magnetic resonance imaging (MRI) unit

#3978 HS: Barnes-Jewish St. Peters Hospital
St. Peters (St. Charles County)
\$1,748,190, Replace MRI unit

#3979 HS: Christian Hospital
St. Louis (St. Louis County)
\$2,042,461, Replace cardiac catheterization unit

Any person wishing to request a public hearing for the purpose of commenting on these applications must submit a written request to this effect, which must be received by September 10, 2006. All written requests and comments should be sent to:

Chairman
Missouri Health Facilities Review Committee
c/o Certificate of Need Program
Post Office Box 570
Jefferson City, MO 65102

For additional information contact
Donna Schuessler, (573) 751-6403.

STATUTORY LIST OF CONTRACTORS BARRED FROM PUBLIC WORKS PROJECTS

The following is a list of contractor(s) who have been prosecuted and convicted of violating the Missouri Prevailing Wage Law, and whose Notice of Conviction has been filed with the Secretary of State pursuant to Section 290.330, RSMo.

<u>Name of Contractor</u>	<u>Name of Officers</u>	<u>Address</u>	<u>Date of Conviction</u>	<u>Debarment Period</u>
Stan Buffington DBA Buffington Brothers Heating & Cooling		110 N. Riverview Poplar Bluff, MO 63901	10/26/05	10/26/2005-10/26/06

The Secretary of State is required by sections 347.141 and 359.481, RSMo 2000 to publish dissolutions of limited liability companies and limited partnerships. The content requirements for the one-time publishing of these notices are prescribed by statute. This listing is published pursuant to these statutes. We request that documents submitted for publication in this section be submitted in camera ready 8 1/2" x 11" manuscript.

**NOTICE OF DISSOLUTION OF LIMITED LIABILITY COMPANY
TO ALL CREDITORS OF AND CLAIMANTS AGAINST COTTAGE HEIGHTS
MANAGEMENT, LLC**

On August 7, 2006, Cottage Heights Management, LLC, filed Notice of Winding Up for Limited Liability Company with the Missouri Secretary of State. Claims against Cottage Heights Management, LLC, must be submitted to Rick J. Muenks, 3041 S. Kimbrough Avenue, Suite 100, Springfield, Missouri 65807. Claims must include name and address of claimant; amount of claim; basis of claim; and documentation of claim. By law, proceedings are barred unless commenced against the LLC within three years after the publication of this notice.

**NOTICE OF WINDING UP AND DISSOLUTION OF LIMITED LIABILITY COMPANY TO
ALL CREDITORS OF AND CLAIMANTS AGAINST SUTHERLAND HARDWARE &
LUMBER CO., L.L.C.**

On August 4, 2006, Sutherland Hardware & Lumber Co., L.L.C., a Missouri limited liability company, filed its Notice of Winding Up for Limited Liability Company with the Missouri Secretary of State, effective on the filing date. Claims against Sutherland Hardware & Lumber Co., L.L.C. should be presented immediately in writing to Sutherland Lumber Company, c/o Steven W. Scott, 4000 Main Street, Kansas City, Missouri 64111. Each claim shall include the following: (i) the claimant's name, address and telephone number, (ii) the amount of the claim, (iii) the date on which the claim arose, (iv) the basis of the claim, and (v) documentation in support of the claim. A claim against Sutherland Hardware & Lumber Co., L.L.C. will be barred unless a proceeding to enforce the claim is commenced within three (3) years after the publication date of this notice, or the publication date of any other notice required by law, whichever is later.

Notice of Winding Up for A P Solutions, LLC

Any person with a claim against A P Solutions, LLC must present the claim in accordance with the notice of winding up. Mail the claim, including the amount, basis and documentation of the claim to Brandi Morris, 1009 SE Claremont St., Lee's Summit, MO 64081. Any claim against A P Solutions, LLC will be barred unless a proceeding to enforce the claim is commenced within three years after the publication of this notice.

Rule Changes Since Update to Code of State Regulations

This cumulative table gives you the latest status of rules. It contains citations of rulemakings adopted or proposed after deadline for the monthly Update Service to the *Code of State Regulations*, citations are to volume and page number in the *Missouri Register*, except for material in this issue. The first number in the table cite refers to the volume number or the publication year—30 (2005) and 31 (2006). MoReg refers to *Missouri Register* and the numbers refer to a specific *Register* page, R indicates a rescission, W indicates a withdrawal, S indicates a statement of actual cost, T indicates an order terminating a rule, N.A. indicates not applicable, RUC indicates a rule under consideration, and F indicates future effective date.

Rule Number	Agency	Emergency	Proposed	Order	In Addition
OFFICE OF ADMINISTRATION					
1 CSR 10	State Officials' Salary Compensation Schedule				30 MoReg 2435
1 CSR 10-11.030	Commissioner of Administration		31 MoReg 901		
1 CSR 15-1.204	Administrative Hearing Commission		31 MoReg 971		
1 CSR 15-3.200	Administrative Hearing Commission		31 MoReg 971		
1 CSR 15-3.350	Administrative Hearing Commission		31 MoReg 972		
1 CSR 15-3.390	Administrative Hearing Commission		31 MoReg 972		
1 CSR 15-3.420	Administrative Hearing Commission		31 MoReg 972		
1 CSR 15-3.470	Administrative Hearing Commission		31 MoReg 973		
1 CSR 20-5.020	Personnel Advisory Board and Division of Personnel		30 MoReg 2384 31 MoReg 1057		
DEPARTMENT OF AGRICULTURE					
2 CSR 80-5.010	State Milk Board		31 MoReg 586	31 MoReg 1181	
2 CSR 110-2.010	Office of the Director	31 MoReg 1293	31 MoReg 1306		
DEPARTMENT OF CONSERVATION					
3 CSR 10-1.010	Conservation Commission		31 MoReg 1058		
3 CSR 10-4.111	Conservation Commission		31 MoReg 768		
3 CSR 10-7.440	Conservation Commission		N.A.	31 MoReg 1246	
3 CSR 10-9.110	Conservation Commission		31 MoReg 768	31 MoReg 1181	
3 CSR 10-9.565	Conservation Commission		31 MoReg 769		
3 CSR 10-10.722	Conservation Commission		31 MoReg 973	This Issue	
DEPARTMENT OF ECONOMIC DEVELOPMENT					
4 CSR 10	Missouri State Board of Accountancy (<i>Changed to 20 CSR 2010</i>)				31 MoReg 1330
4 CSR 10-1.010	Missouri State Board of Accountancy		31 MoReg 653		
4 CSR 10-1.020	Missouri State Board of Accountancy		31 MoReg 653		
4 CSR 10-1.050	Missouri State Board of Accountancy		31 MoReg 654		
4 CSR 10-2.005	Missouri State Board of Accountancy		31 MoReg 656		
4 CSR 10-2.022	Missouri State Board of Accountancy		31 MoReg 656R 31 MoReg 656		
4 CSR 10-2.041	Missouri State Board of Accountancy		31 MoReg 659		
4 CSR 10-2.051	Missouri State Board of Accountancy		31 MoReg 659		
4 CSR 10-2.065	Missouri State Board of Accountancy		31 MoReg 660		
4 CSR 10-2.070	Missouri State Board of Accountancy		31 MoReg 663		
4 CSR 10-2.072	Missouri State Board of Accountancy		31 MoReg 663		
4 CSR 10-2.075	Missouri State Board of Accountancy		31 MoReg 664		
4 CSR 10-2.130	Missouri State Board of Accountancy		31 MoReg 664R 31 MoReg 664		
4 CSR 10-2.140	Missouri State Board of Accountancy		31 MoReg 667		
4 CSR 10-2.150	Missouri State Board of Accountancy		31 MoReg 668R 31 MoReg 668		
4 CSR 10-2.160	Missouri State Board of Accountancy		31 MoReg 669		
4 CSR 15	Acupuncturist Advisory Committee (<i>Changed to 20 CSR 2015</i>)				31 MoReg 1330
4 CSR 30	Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Landscape Architects (<i>Changed to 20 CSR 2030</i>)				31 MoReg 1331
4 CSR 30-6.015	Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Landscape Architects (<i>Changed to 20 CSR 2030-6.015</i>)		This Issue		
4 CSR 40	Office of Athletics (<i>Changed to 20 CSR 2040</i>)				31 MoReg 1332
4 CSR 40-4.040	Office of Athletics (<i>Changed to 20 CSR 2040-4.040</i>)		31 MoReg 1310		
4 CSR 40-4.090	Office of Athletics (<i>Changed to 20 CSR 2040-4.090</i>)		31 MoReg 1310		
4 CSR 45	Athlete Agents (<i>Changed to 20 CSR 2045</i>)				31 MoReg 1333
4 CSR 50	State Banking Board (<i>Changed to 20 CSR 1135</i>)				31 MoReg 1333
4 CSR 60	State Board of Barber Examiners (<i>Changed to 20 CSR 2060</i>)				31 MoReg 1333

Rule Number	Agency	Emergency	Proposed	Order	In Addition
4 CSR 65	Endowed Care Cemeteries (<i>Changed to 20 CSR 2065</i>)				31 MoReg 1333
4 CSR 70	State Board of Chiropractic Examiners (<i>Changed to 20 CSR 2070</i>)				31 MoReg 1334
4 CSR 85-4.010	Division of Community and Economic Development		31 MoReg 973		
4 CSR 90	State Board of Cosmetology (<i>Changed to 20 CSR 2090</i>)				31 MoReg 1334
4 CSR 95	Committee for Professional Counselors (<i>Changed to 20 CSR 2095</i>)				31 MoReg 1335
4 CSR 100	Division of Credit Unions (<i>Changed to 20 CSR 1100</i>)				31 MoReg 1335
4 CSR 100-2.075	Division of Credit Unions		31 MoReg 1058		
4 CSR 105	Credit Union Commission (<i>Changed to 20 CSR 1105</i>)				31 MoReg 1336
4 CSR 105-3.010	Credit Union Commission		31 MoReg 1061		
4 CSR 105-3.011	Credit Union Commission		31 MoReg 1062		
4 CSR 105-3.012	Credit Union Commission		31 MoReg 1063		
4 CSR 110	Missouri Dental Board (<i>Changed to 20 CSR 2110</i>)				31 MoReg 1336
4 CSR 110-2.110	Missouri Dental Board (<i>Changed to 20 CSR 2110-2.110</i>)		This Issue		
4 CSR 110-2.114	Missouri Dental Board (<i>Changed to 20 CSR 2110-2.114</i>)		This Issue		
4 CSR 115	State Committee of Dietitians (<i>Changed to 20 CSR 2115</i>)				31 MoReg 1337
4 CSR 120	State board of Embalmers and Funeral Directors (<i>Changed to 20 CSR 2120</i>)				31 MoReg 1337
4 CSR 120-2.060	State Board of Embalmers and Funeral Directors		31 MoReg 542	31 MoReg 1181	
4 CSR 140	Division of Finance (<i>Changed to 20 CSR 1140</i>)				31 MoReg 1337
4 CSR 145	Missouri Board of Geologist Registration (<i>Changed to 20 CSR 2145</i>)				31 MoReg 1339
4 CSR 150	State Board of Registration for the Healing Arts (<i>Changed to 20 CSR 2150</i>)				31 MoReg 1340
4 CSR 150-2.125	State Board of Registration for the Healing Arts (<i>Changed to 20 CSR 2150-2.125</i>)		This Issue		
4 CSR 150-3.010	State Board of Registration for the Healing Arts (<i>Changed to 20 CSR 2150-3.010</i>)		This Issue		
4 CSR 150-3.203	State Board of Registration for the Healing Arts (<i>Changed to 20 CSR 2150-3.203</i>)		This Issue		
4 CSR 150-5.100	State Board of Registration for the Healing Arts (<i>Changed to 20 CSR 2150-5.100</i>)		This Issue		
4 CSR 150-7.135	State Board of Registration for the Healing Arts (<i>Changed to 20 CSR 2150-7.135</i>)		This Issue		
4 CSR 165	Board of Examiners for Hearing Instrument Specialists (<i>Changed to 20 CSR 2165</i>)				31 MoReg 1342
4 CSR 193	Interior Design Council (<i>Changed to 20 CSR 2193</i>)				31 MoReg 1342
4 CSR 197	Board of Therapeutic Massage (<i>Changed to 20 CSR 2197</i>)				31 MoReg 1342
4 CSR 200	State Board of Nursing (<i>Changed to 20 CSR 2200</i>)				31 MoReg 1343
4 CSR 200-4.100	State Board of Nursing (<i>Changed to 20 CSR 2200-4.100</i>)		This Issue		
4 CSR 200-4.200	State Board of Nursing (<i>Changed to 20 CSR 2200-4.200</i>)		This Issue		
4 CSR 205	Missouri Board of Occupational Therapy (<i>Changed to 20 CSR 2205</i>)				31 MoReg 1344
4 CSR 210	State Board of Optometry (<i>Changed to 20 CSR 2210</i>)				31 MoReg 1344
4 CSR 220	State Board of Pharmacy (<i>Changed to 20 CSR 2220</i>)				31 MoReg 1344
4 CSR 230	State Board of Podiatric Medicine (<i>Changed to 20 CSR 2230</i>)				31 MoReg 1345
4 CSR 231	Division of Professional Registration (<i>Changed to 20 CSR 2231</i>)				31 MoReg 1346
4 CSR 232	Missouri State Committee of Interpreters (<i>Changed to 20 CSR 2232</i>)				31 MoReg 1346
4 CSR 232-3.010	Missouri State Committee of Interpreters		31 MoReg 1211		
4 CSR 233	State Committee of Marital and Family Therapists (<i>Changed to 20 CSR 2233</i>)				31 MoReg 1346
4 CSR 235	State Committee of Psychologists (<i>Changed to 20 CSR 2235</i>)				31 MoReg 1346
4 CSR 235-5.030	State Committee of Psychologists		31 MoReg 1212R 31 MoReg 1212		
4 CSR 235-7.020	State Committee of Psychologists		31 MoReg 1218		
4 CSR 235-7.030	State Committee of Psychologists		31 MoReg 1218		
4 CSR 240-2.135	Public Service Commission		31 MoReg 982		
4 CSR 240-3.161	Public Service Commission		31 MoReg 1063		

Rule Number	Agency	Emergency	Proposed	Order	In Addition
4 CSR 240-3.545	Public Service Commission		31 MoReg 902		
4 CSR 240-13.055	Public Service Commission		31 MoReg 902	This Issue	
4 CSR 240-20.090	Public Service Commission		31 MoReg 1076		
4 CSR 245	Real Estate Appraisers (<i>Changed to 20 CSR 2245</i>)				31 MoReg 1347
4 CSR 250	Missouri Real Estate Commission (<i>Changed to 20 CSR 2250</i>)				31 MoReg 1348
4 CSR 250-3.010	Missouri Real Estate Commission		31 MoReg 672	31 MoReg 1246	
4 CSR 250-3.020	Missouri Real Estate Commission		31 MoReg 675	31 MoReg 1246	
4 CSR 250-5.030	Missouri Real Estate Commission		31 MoReg 675	31 MoReg 1247	
4 CSR 250-5.040	Missouri Real Estate Commission		31 MoReg 678	31 MoReg 1247	
4 CSR 250-6.010	Missouri Real Estate Commission		31 MoReg 678R	31 MoReg 1247R	
4 CSR 250-6.020	Missouri Real Estate Commission		31 MoReg 678R	31 MoReg 1247R	
4 CSR 250-6.040	Missouri Real Estate Commission		31 MoReg 678R	31 MoReg 1247R	
4 CSR 250-6.050	Missouri Real Estate Commission		31 MoReg 679R	31 MoReg 1247R	
4 CSR 250-6.060	Missouri Real Estate Commission		31 MoReg 679	31 MoReg 1247	
4 CSR 250-7.010	Missouri Real Estate Commission		31 MoReg 682R	31 MoReg 1248R	
			31 MoReg 682	31 MoReg 1248	
4 CSR 250-7.020	Missouri Real Estate Commission		31 MoReg 686R	31 MoReg 1248R	
			31 MoReg 686	31 MoReg 1248	
4 CSR 250-7.030	Missouri Real Estate Commission		31 MoReg 691R	31 MoReg 1248R	
4 CSR 250-7.040	Missouri Real Estate Commission		31 MoReg 691R	31 MoReg 1248R	
4 CSR 250-7.050	Missouri Real Estate Commission		31 MoReg 691R	31 MoReg 1249R	
4 CSR 250-7.060	Missouri Real Estate Commission		31 MoReg 691	31 MoReg 1249	
4 CSR 250-7.070	Missouri Real Estate Commission		31 MoReg 692	31 MoReg 1249	
4 CSR 250-7.080	Missouri Real Estate Commission		31 MoReg 693	31 MoReg 1249	
4 CSR 250-7.090	Missouri Real Estate Commission		31 MoReg 696	31 MoReg 1249	
4 CSR 250-10.010	Missouri Real Estate Commission		31 MoReg 698R	31 MoReg 1250R	
4 CSR 250-10.020	Missouri Real Estate Commission		31 MoReg 698R	31 MoReg 1250R	
4 CSR 250-10.030	Missouri Real Estate Commission		31 MoReg 698R	31 MoReg 1250R	
4 CSR 250-10.040	Missouri Real Estate Commission		31 MoReg 698R	31 MoReg 1250R	
4 CSR 250-10.050	Missouri Real Estate Commission		31 MoReg 699R	31 MoReg 1250R	
4 CSR 250-10.060	Missouri Real Estate Commission		31 MoReg 699R	31 MoReg 1250R	
4 CSR 250-10.070	Missouri Real Estate Commission		31 MoReg 699R	31 MoReg 1250R	
4 CSR 250-10.075	Missouri Real Estate Commission		31 MoReg 699R	31 MoReg 1251R	
4 CSR 250-10.080	Missouri Real Estate Commission		31 MoReg 700R	31 MoReg 1251R	
4 CSR 250-10.100	Missouri Real Estate Commission		31 MoReg 700	31 MoReg 1251	
4 CSR 255	Missouri Board for Respiratory Care (<i>Changed to 20 CSR 2255</i>)				31 MoReg 1349
4 CSR 255-1.040	Missouri Board for Respiratory Care (<i>Changed to 20 CSR 2255-1.040</i>)		This Issue		
4 CSR 255-2.010	Missouri Board for Respiratory Care (<i>Changed to 20 CSR 2255-2.010</i>)		This Issue		
4 CSR 255-2.020	Missouri Board for Respiratory Care (<i>Changed to 20 CSR 2255-2.020</i>)		This Issue		
4 CSR 255-2.030	Missouri Board for Respiratory Care (<i>Changed to 20 CSR 2255-2.030</i>)		This Issue		
4 CSR 255-4.010	Missouri Board for Respiratory Care (<i>Changed to 20 CSR 2255-4.010</i>)		This Issue		
4 CSR 263	State Committee for Social Workers (<i>Changed to 20 CSR 2263</i>)				31 MoReg 1349
4 CSR 263-1.035	State Committee for Social Workers (<i>Changed to 20 CSR 2263-1.035</i>)		This Issue		
4 CSR 263-2.090	State Committee for Social Workers (<i>Changed to 20 CSR 2263-2.090</i>)		This Issue		
4 CSR 267	Office of Tattooing, Body Piercing and Branding (<i>Changed to 20 CSR 2267</i>)				31 MoReg 1350
4 CSR 267-2.020	Office of Tattooing, Body Piercing and Branding		31 MoReg 1219		
4 CSR 270	Missouri Veterinary Medical Board (<i>Changed to 20 CSR 2270</i>)				31 MoReg 1350
4 CSR 270-1.050	Missouri Veterinary Medical Board (<i>Changed to 20 CSR 2270-1.050</i>)		This Issue		
DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION					
5 CSR 30-260.010	Division of Administrative and Financial Services		31 MoReg 849		
5 CSR 30-261.025	Division of Administrative and Financial Services		31 MoReg 984		
5 CSR 30-345.010	Division of Administrative and Financial Services		This IssueR		
5 CSR 50-345.020	Division of School Improvement		31 MoReg 1223R		
5 CSR 80-805.015	Teacher Quality and Urban Education		31 MoReg 1223		
5 CSR 80-805.030	Teacher Quality and Urban Education		31 MoReg 849		
DEPARTMENT OF TRANSPORTATION					
7 CSR 10-1.010	Missouri Highways and Transportation Commission		31 MoReg 1083		
7 CSR 10-25.010	Missouri Highways and Transportation Commission				31 MoReg 1253 This Issue
7 CSR 10-25.040	Missouri Highways and Transportation Commission		31 MoReg 906		

Rule Number	Agency	Emergency	Proposed	Order	In Addition
DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS					
8 CSR 50-2.030	Division of Workers' Compensation	This Issue	This Issue		
8 CSR 50-2.060	Division of Workers' Compensation		31 MoReg 770R 31 MoReg 771	31 MoReg 1328R 31 MoReg 1328	
DEPARTMENT OF MENTAL HEALTH					
9 CSR 45-2.015	Division of Mental Retardation and Developmental Disabilities		31 MoReg 704		
9 CSR 45-2.017	Division of Mental Retardation and Developmental Disabilities		31 MoReg 704		
9 CSR 45-5.120	Division of Mental Retardation and Developmental Disabilities				31 MoReg 394RUC
DEPARTMENT OF NATURAL RESOURCES					
10 CSR 10-5.300	Air Conservation Commission		31 MoReg 714		
10 CSR 10-6.070	Air Conservation Commission		31 MoReg 906		
10 CSR 10-6.075	Air Conservation Commission		31 MoReg 908		
10 CSR 10-6.080	Air Conservation Commission		31 MoReg 910		
10 CSR 10-6.110	Air Conservation Commission		31 MoReg 911		
10 CSR 10-6.345	Air Conservation Commission		31 MoReg 919		
10 CSR 20-1.020	Clean Water Commission		31 MoReg 851		
10 CSR 25-3.260	Hazardous Waste Management Commission		31 MoReg 719		
10 CSR 25-4.261	Hazardous Waste Management Commission		31 MoReg 720		
10 CSR 25-5.262	Hazardous Waste Management Commission		31 MoReg 720		
10 CSR 25-6.263	Hazardous Waste Management Commission		31 MoReg 721		
10 CSR 25-7.264	Hazardous Waste Management Commission		31 MoReg 721		
10 CSR 25-7.265	Hazardous Waste Management Commission		31 MoReg 722		
10 CSR 25-7.266	Hazardous Waste Management Commission		31 MoReg 722		
10 CSR 25-7.268	Hazardous Waste Management Commission		31 MoReg 723		
10 CSR 25-7.270	Hazardous Waste Management Commission		31 MoReg 723		
10 CSR 25-11.279	Hazardous Waste Management Commission		31 MoReg 724		
10 CSR 25-16.273	Hazardous Waste Management Commission		31 MoReg 725		
10 CSR 80-2.010	Solid Waste Management		31 MoReg 1141		
10 CSR 80-2.015	Solid Waste Management		31 MoReg 1145		
10 CSR 140-2.020	Division of Energy				31 MoReg 872
DEPARTMENT OF PUBLIC SAFETY					
11 CSR 10-5.010	Adjutant General	This Issue	This Issue		
11 CSR 40-2.010	Division of Fire Safety		31 MoReg 852		
11 CSR 40-2.025	Division of Fire Safety		31 MoReg 853		
11 CSR 45-3.010	Missouri Gaming Commission		31 MoReg 725		
11 CSR 45-4.260	Missouri Gaming Commission		31 MoReg 726		
11 CSR 45-5.237	Missouri Gaming Commission		31 MoReg 1155		
11 CSR 45-7.030	Missouri Gaming Commission		31 MoReg 1313		
11 CSR 45-7.040	Missouri Gaming Commission		31 MoReg 1315		
11 CSR 45-7.080	Missouri Gaming Commission		31 MoReg 1317		
11 CSR 45-7.120	Missouri Gaming Commission		31 MoReg 1319		
11 CSR 45-8.060	Missouri Gaming Commission		31 MoReg 726		
11 CSR 45-8.170	Missouri Gaming Commission		31 MoReg 376		
11 CSR 45-10.020	Missouri Gaming Commission		31 MoReg 726		
11 CSR 45-30.035	Missouri Gaming Commission		31 MoReg 379	31 MoReg 1182	
11 CSR 45-30.090	Missouri Gaming Commission		31 MoReg 379	31 MoReg 1182	
11 CSR 45-30.140	Missouri Gaming Commission		31 MoReg 379	31 MoReg 1182	
11 CSR 45-30.175	Missouri Gaming Commission		31 MoReg 380	31 MoReg 1182	
11 CSR 45-30.390	Missouri Gaming Commission		31 MoReg 380	31 MoReg 1183	
11 CSR 45-30.480	Missouri Gaming Commission		31 MoReg 381	31 MoReg 1183	
11 CSR 45-30.600	Missouri Gaming Commission		31 MoReg 381	31 MoReg 1183	
11 CSR 45-30.610	Missouri Gaming Commission		31 MoReg 384	31 MoReg 1184	
11 CSR 50-2.320	Missouri State Highway Patrol		This Issue		
DEPARTMENT OF REVENUE					
12 CSR 10-42.070	Director of Revenue		31 MoReg 1319R		
12 CSR 10-103.400	Director of Revenue		31 MoReg 857		
12 CSR 10-108.300	Director of Revenue		31 MoReg 861		
12 CSR 10-200.010	Director of Revenue		31 MoReg 727	31 MoReg 1328W	
12 CSR 30-1.010	State Tax Commission		31 MoReg 771	31 MoReg 1328	
12 CSR 30-1.020	State Tax Commission		31 MoReg 772	31 MoReg 1328	
12 CSR 30-3.090	State Tax Commission		31 MoReg 772	31 MoReg 1329	
DEPARTMENT OF SOCIAL SERVICES					
13 CSR 35-60.010	Children's Division	31 MoReg 1295	31 MoReg 1319		
13 CSR 35-60.020	Children's Division		31 MoReg 1320		
13 CSR 35-60.030	Children's Division	31 MoReg 1296	31 MoReg 1320		
13 CSR 35-60.040	Children's Division		31 MoReg 1321		
13 CSR 35-60.050	Children's Division		31 MoReg 1322		
13 CSR 35-60.060	Children's Division		31 MoReg 1324		
13 CSR 40-60.010	Family Support Division	31 MoReg 1297R	31 MoReg 1324R		
13 CSR 40-60.020	Family Support Division		31 MoReg 1325R		
13 CSR 40-60.030	Family Support Division	31 MoReg 1297R	31 MoReg 1325R		
13 CSR 40-60.040	Family Support Division		31 MoReg 1325R		
13 CSR 40-60.050	Family Support Division		31 MoReg 1325R		

Rule Number	Agency	Emergency	Proposed	Order	In Addition
13 CSR 40-60.060	Family Support Division		31 MoReg 1326R		
13 CSR 40-110.030	Family Support Division		31 MoReg 731	31 MoReg 1251W	
13 CSR 70-1.010	Division of Medical Services		31 MoReg 772	31 MoReg 1329	
13 CSR 70-3.030	Division of Medical Services		31 MoReg 1155		
13 CSR 70-3.100	Division of Medical Services		31 MoReg 1086		
13 CSR 70-3.170	Division of Medical Services	31 MoReg 899 31 MoReg 1047	31 MoReg 1087		
13 CSR 70-3.180	Division of Medical Services		31 MoReg 1155		
13 CSR 70-4.080	Division of Medical Services	31 MoReg 1048	31 MoReg 1091		
13 CSR 70-6.010	Division of Medical Services		31 MoReg 468 31 MoReg 1326	31 MoReg 1184	
13 CSR 70-10.015	Division of Medical Services	31 MoReg 1050	31 MoReg 920		
13 CSR 70-10.080	Division of Medical Services	31 MoReg 1051	31 MoReg 923		
13 CSR 70-15.010	Division of Medical Services		31 MoReg 1156		
13 CSR 70-15.110	Division of Medical Services	31 MoReg 900 31 MoReg 1052	31 MoReg 925		
13 CSR 70-40.010	Division of Medical Services	31 MoReg 1052	31 MoReg 927		
13 CSR 70-45.010	Division of Medical Services		31 MoReg 1095		
13 CSR 70-60.010	Division of Medical Services	31 MoReg 1053	31 MoReg 929		
13 CSR 70-65.010	Division of Medical Services		31 MoReg 987		
13 CSR 70-70.010	Division of Medical Services		31 MoReg 987		
13 CSR 70-90.010	Division of Medical Services		31 MoReg 988		
13 CSR 70-95.010	Division of Medical Services		31 MoReg 988		
13 CSR 70-99.010	Division of Medical Services		31 MoReg 988		
DEPARTMENT OF CORRECTIONS					
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15 CSR 30-10.020	Secretary of State	31 MoReg 1130	31 MoReg 1160		
15 CSR 30-10.130	Secretary of State	31 MoReg 1132	31 MoReg 1162		
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19 CSR 60-50.400	Missouri Health Facilities Review Committee	This Issue	This Issue		
19 CSR 60-50.410	Missouri Health Facilities Review Committee	This Issue	This Issue		
19 CSR 60-50.430	Missouri Health Facilities Review Committee	This Issue	This Issue		
19 CSR 60-50.450	Missouri Health Facilities Review Committee	This Issue	This Issue		
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19 CSR 60-50.600	Missouri Health Facilities Review Committee	This Issue	This Issue		
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20 CSR 200-6.300	Financial Examination		This Issue		
20 CSR 200-11.101	Financial Examination		31 MoReg 776	This Issue	
20 CSR 200-18.010	Financial Examination		31 MoReg 1166		
20 CSR 200-18.020	Financial Examination		31 MoReg 1174		
20 CSR 400-5.410	Life, Annuities and Health		31 MoReg 1226		
20 CSR 700-6.350	Licensing		31 MoReg 931		
20 CSR 1100	Division of Credit Unions (<i>Changed from 4 CSR 100</i>)				31 MoReg 1335
20 CSR 1105	Credit Union Commission (<i>Changed from 4 CSR 105</i>)				31 MoReg 1336
20 CSR 1135	State Banking Board (<i>Changed from 4 CSR 50</i>)				31 MoReg 1333
20 CSR 1140	Division of Finance (<i>Changed from 4 CSR 140</i>)				31 MoReg 1337
20 CSR 2010	Missouri State Board of Accountancy (<i>Changed from 4 CSR 10</i>)				31 MoReg 1330
20 CSR 2015	Acupuncturist Advisory Committee (<i>Changed from 4 CSR 15</i>)				31 MoReg 1330
20 CSR 2030	Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Landscape Architects (<i>Changed from 4 CSR 30</i>)				31 MoReg 1331
20 CSR 2030-6.015	Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Landscape Architects (<i>Changed from 4 CSR 30-6.015</i>)		This Issue		
20 CSR 2040	Office of Athletics (<i>Changed from 4 CSR 40</i>)				31 MoReg 1332
20 CSR 2040-4.040	Office of Athletics (<i>Changed from 4 CSR 40-4.040</i>)		31 MoReg 1310		
20 CSR 2040-4.090	Office of Athletics (<i>Changed from 4 CSR 40-4.090</i>)		31 MoReg 1310		
20 CSR 2045	Athlete Agents (<i>Changed from 4 CSR 45</i>)				31 MoReg 1333
20 CSR 2060	State Board of Barber Examiners (<i>Changed from 4 CSR 60</i>)				31 MoReg 1333
20 CSR 2065	Endowed Care Cemeteries (<i>Changed from 4 CSR 65</i>)				31 MoReg 1333
20 CSR 2070	State Board of Chiropractic Examiners (<i>Changed from 4 CSR 70</i>)				31 MoReg 1334
20 CSR 2090	State Board of Cosmetology (<i>Changed from 4 CSR 90</i>)				31 MoReg 1334
20 CSR 2095	Committee for Professional Counselors (<i>Changed from 4 CSR 95</i>)				31 MoReg 1335
20 CSR 2110	Missouri Dental Board (<i>Changed from 4 CSR 110</i>)				31 MoReg 1336
20 CSR 2110-2.110	Missouri Dental Board (<i>Changed from 4 CSR 110-2.110</i>)		This Issue		
20 CSR 2110-2.114	Missouri Dental Board (<i>Changed from 4 CSR 110-2.114</i>)		This Issue		
20 CSR 2115	State Committee of Dietitians (<i>Changed from 4 CSR 115</i>)				31 MoReg 1337
20 CSR 2120	State Board of Embalmers and Funeral Directors (<i>Changed from 4 CSR 120</i>)				31 MoReg 1337
20 CSR 2145	Missouri Board of Geologist Registration (<i>Changed from 4 CSR 145</i>)				31 MoReg 1340
20 CSR 2150	State Board of Registration for the Healing Arts (<i>Changed from 4 CSR 150</i>)				31 MoReg 1340
20 CSR 2150-2.125	State Board of Registration for the Healing Arts (<i>Changed from 4 CSR 150-2.125</i>)		This Issue		
20 CSR 2150-3.010	State Board of Registration for the Healing Arts (<i>Changed from 4 CSR 150-3.010</i>)		This Issue		
20 CSR 2150-3.203	State Board of Registration for the Healing Arts (<i>Changed from 4 CSR 150-3.203</i>)		This Issue		
20 CSR 2150-5.100	State Board of Registration for the Healing Arts (<i>Changed from 4 CSR 150-5.100</i>)		This Issue		
20 CSR 2150-7.135	State Board of Registration for the Healing Arts (<i>Changed from 4 CSR 150-7.135</i>)		This Issue		
20 CSR 2165	Board of Examiners for Hearing Instrument Specialists (<i>Changed from 4 CSR 165</i>)				31 MoReg 1342
20 CSR 2193	Interior Design Council (<i>Changed from 4 CSR 193</i>)				31 MoReg 1342
20 CSR 2197	Board of Therapeutic Massage (<i>Changed from 4 CSR 197</i>)				31 MoReg 1343
20 CSR 2200	State Board of Nursing (<i>Changed from 4 CSR 200</i>)				31 MoReg 1343
20 CSR 2200-4.100	State Board of Nursing (<i>Changed from 4 CSR 200-4.100</i>)		This Issue		
20 CSR 2200-4.200	State Board of Nursing (<i>Changed from 4 CSR 200-4.200</i>)		This Issue		

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20 CSR 2205	Missouri Board of Occupational Therapy (<i>Changed from 4 CSR 205</i>)				31 MoReg 1344
20 CSR 2210	State Board of Optometry (<i>Changed from 4 CSR 210</i>)				31 MoReg 1344
20 CSR 2220	State Board of Pharmacy (<i>Changed from 4 CSR 220</i>)				31 MoReg 1344
20 CSR 2230	State Board of Podiatric Medicine (<i>Changed from 4 CSR 230</i>)				31 MoReg 1345
20 CSR 2231	Division of Professional Registration (<i>Changed from 4 CSR 231</i>)				31 MoReg 1346
20 CSR 2232	Missouri State Committee of Interpreters (<i>Changed from 4 CSR 232</i>)				31 MoReg 1346
20 CSR 2233	State Committee of Marital and Family Therapists (<i>Changed from 4 CSR 233</i>)				31 MoReg 1346
20 CSR 2235	State Committee of Psychologists (<i>Changed from 4 CSR 235</i>)				31 MoReg 1346
20 CSR 2245	Real Estate Appraisers (<i>Changed from 4 CSR 245</i>)				31 MoReg 1347
20 CSR 2250	Missouri Real Estate Commission (<i>Changed from 4 CSR 250</i>)				31 MoReg 1348
20 CSR 2255	Missouri Board for Respiratory Care (<i>Changed from 4 CSR 255</i>)				31 MoReg 1349
20 CSR 2255-1.040	Missouri Board for Respiratory Care (<i>Changed from 4 CSR 255-1.040</i>)		This Issue		
20 CSR 2255-2.010	Missouri Board for Respiratory Care (<i>Changed from 4 CSR 255-2.010</i>)		This Issue		
20 CSR 2255-2.020	Missouri Board for Respiratory Care (<i>Changed from 4 CSR 255-2.020</i>)		This Issue		
20 CSR 2255-2.030	Missouri Board for Respiratory Care (<i>Changed from 4 CSR 255-2.030</i>)		This Issue		
20 CSR 2255-4.010	Missouri Board for Respiratory Care (<i>Changed from 4 CSR 255-4.010</i>)		This Issue		
20 CSR 2263	State Committee for Social Workers (<i>Changed from 4 CSR 263</i>)				31 MoReg 1349
20 CSR 2263-1.035	State Committee for Social Workers (<i>Changed from 4 CSR 263-1.035</i>)		This Issue		
20 CSR 2263-2.090	State Committee for Social Workers (<i>Changed from 4 CSR 263-2.090</i>)		This Issue		
20 CSR 2267	Office of Tattooing, Body Piercing and Branding (<i>Changed from 4 CSR 267</i>)				31 MoReg 1350
20 CSR 2270	Missouri Veterinary Medical Board (<i>Changed from 4 CSR 270</i>)				31 MoReg 1350
20 CSR 2270-1.050	Missouri Veterinary Medical Board (<i>Changed from 4 CSR 270-1.050</i>)		This Issue		

Agency **Publication** **Expiration****Department of Agriculture****Office of the Director**

2 CSR 110-2.010	Description of General Organization; Definitions; Requirements of Eligibility, Licensing, Application for Grants; Procedures for Grant Disbursements; Record Keeping Requirements, and Verification Procedures for the Missouri Qualified Biodiesel Producer Incentive Program	31 MoReg 1293	February 23, 2007
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Department of Labor and Industrial Relations**Workers' Compensation**

8 CSR 50-2.030	Resolution of Medical Fee Disputes	This Issue	February 27, 2007
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Department of Public Safety**Adjutant General**

11 CSR 10-5.010	Missouri Veterans' Recognition Program	This Issue	February 24, 2007
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Department of Social Services**Children's Division**

13 CSR 35-60.010	Family Homes Offering Foster Care	31 MoReg 1295	January 30, 2007
13 CSR 35-60.030	Minimum Qualifications of Foster Parent(s)	31 MoReg 1296	January 30, 2007

Family Support Division

13 CSR 40-60.010	Family Homes Offering Foster Care	31 MoReg 1297	January 30, 2007
13 CSR 40-60.030	Minimum Qualifications of Foster Parent(s)	31 MoReg 1297	January 30, 2007

Division of Medical Services

13 CSR 70-3.170	Medicaid Managed Care Organization Reimbursement Allowance	31 MoReg 899	November 10, 2006
13 CSR 70-3.170	Medicaid Managed Care Organization Reimbursement Allowance	31 MoReg 1047	December 28, 2006
13 CSR 70-4.080	Children's Health Insurance Program	31 MoReg 1048	December 28, 2006
13 CSR 70-10.015	Prospective Reimbursement Plan for Nursing Facility Services	31 MoReg 1050	December 28, 2006
13 CSR 70-10.080	Prospective Reimbursement Plan for HIV Nursing Facility Services . .	31 MoReg 1051	December 28, 2006
13 CSR 70-15.110	Federal Reimbursement Allowance (FRA)	31 MoReg 900	November 15, 2006
13 CSR 70-15.110	Federal Reimbursement Allowance (FRA)	31 MoReg 1052	December 28, 2006
13 CSR 70-40.010	Optical Care Benefits and Limitations—Medicaid Program	31 MoReg 1052	December 28, 2006
13 CSR 70-60.010	Durable Medical Equipment Program	31 MoReg 1053	December 28, 2006

Elected Officials**Secretary of State**

15 CSR 30-10.010	Definitions	31 MoReg 1129	February 22, 2007
15 CSR 30-10.020	Certification Statements for New or Modified Electronic Voting Systems	31 MoReg 1130	February 22, 2007
15 CSR 30-10.130	Voter Education and Voting Device Preparation (DREs and Precinct Counters)	31 MoReg 1132	February 22, 2007
15 CSR 30-10.140	Electronic Ballot Tabulation—Counting Preparation and Logic and Accuracy Testing (DREs and Precinct Counters)	31 MoReg 1133	February 22, 2007
15 CSR 30-10.150	Closing Polling Places (Precinct Counters and DREs)	31 MoReg 1134	February 22, 2007
15 CSR 30-10.160	Electronic Ballot Tabulation—Election Procedures (Precinct Counters and DREs)	31 MoReg 1135	February 22, 2007

Department of Health and Senior Services**Missouri Health Facilities Review Committee**

19 CSR 60-50.300	Definitions for the Certificate of Need Process	This Issue	February 23, 2007
19 CSR 60-50.400	Letter of Intent Process	This Issue	February 23, 2007
19 CSR 60-50.410	Letter of Intent Package	This Issue	February 23, 2007
19 CSR 60-50.430	Application Package	This Issue	February 23, 2007
19 CSR 60-50.450	Criteria and Standards for Long-Term Care	This Issue	February 23, 2007
19 CSR 60-50.470	Criteria and Standards for Financial Feasibility	This Issue	February 23, 2007
19 CSR 60-50.600	Certificate of Need Decisions	This Issue	February 23, 2007
19 CSR 60-50.700	Post-Decision Activity	This Issue	February 23, 2007
19 CSR 60-50.800	Meeting Procedures	This Issue	February 23, 2007
19 CSR 60-50.900	Administration	This Issue	February 23, 2007

Department of Insurance, Financial Institutions and Professional Registration**Missouri State Committee of Interpreters**

20 CSR 2232-2.400	Certification Recognized by the Board	Next Issue	February 27, 2007
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Executive Orders

Executive Orders	Subject Matter	Filed Date	Publication
2006			
06-01	Designates members of staff with supervisory authority over selected state agencies	January 10, 2006	31 MoReg 281
06-02	Extends the deadline for the State Retirement Consolidation Commission to issue its final report and terminate operations to March 1, 2006	January 11, 2006	31 MoReg 283
06-03	Creates and establishes the Missouri Healthcare Information Technology Task Force	January 17, 2006	31 MoReg 371
06-04	Governor Matt Blunt transfers functions, personnel, property, etc. of the Division of Finance, the State Banking Board, the Division of Credit Unions, and the Division of Professional Registration to the Department of Insurance. Renames the Department of Insurance as the Missouri Department of Insurance, Financial Institutions and Professional Registration. Effective August 28, 2006	February 1, 2006	31 MoReg 448
06-05	Governor Matt Blunt transfers functions, personnel, property, etc. of the Missouri Rx Plan Advisory Commission to the Missouri Department of Health and Senior Services. Effective August 28, 2006	February 1, 2006	31 MoReg 451
06-06	Governor Matt Blunt transfers functions, personnel, property, etc. of the Missouri Assistive Technology Advisory Council to the Missouri Department of Elementary and Secondary Education. Rescinds certain provisions of Executive Order 04-08. Effective August 28, 2006	February 1, 2006	31 MoReg 453
06-07	Governor Matt Blunt transfers functions, personnel, property, etc. of the Missouri Life Sciences Research Board to the Missouri Department of Economic Development	February 1, 2006	31 MoReg 455
06-08	Names the state office building, located at 1616 Missouri Boulevard, Jefferson City, Missouri, in honor of George Washington Carver	February 7, 2006	31 MoReg 457
06-09	Directs and orders that the Director of the Department of Public Safety is the Homeland Security Advisor to the Governor, reauthorizes the Homeland Security Advisory Council and assigns them additional duties	February 10, 2006	31 MoReg 460
06-10	Establishes the Government, Faith-based and Community Partnership	March 7, 2006	31 MoReg 577
06-11	Orders and directs the Adjutant General to call and order into active service such portions of the organized militia as he deems necessary to aid the executive officials of Missouri, to protect life and property and to employ such equipment as may be necessary in support of civilian authorities	March 13, 2006	31 MoReg 580
06-12	Declares that a State of Emergency exists in the State of Missouri and directs that the Missouri State Emergency Operation Plan be activated	March 13, 2006	31 MoReg 582
06-13	The Director of the Missouri Department of Natural Resources is vested with full discretionary authority to temporarily waive or suspend the operation of any statutory or administrative rule or regulation currently in place under his purview in order to best serve the public health and safety during the period of the emergency and the subsequent recovery period	March 13, 2006	31 MoReg 584
06-14	Declares a State of Emergency exists in the State of Missouri and directs that the Missouri State Emergency Operation Plan be activated	April 3, 2006	31 MoReg 643
06-15	Orders and directs the Adjutant General, or his designee, to call and order into active service portions of the organized militia as he deems necessary to aid the executive officials of Missouri, to protect life and property, and take such action and employ such equipment as may be necessary in support of civilian authorities, and provide assistance as authorized and directed by the Governor	April 3, 2006	31 MoReg 645
06-16	Declares that a State of Emergency exists in the State of Missouri, directs that the Missouri State Emergency Operations Plan be activated	April 3, 2006	31 MoReg 647
06-17	Declares that a State of Emergency exists in the State of Missouri, directs that the Missouri State Emergency Operations Plan be activated	April 3, 2006	31 MoReg 649
06-18	Authorizes the investigators from the Division of Fire Safety, the Park Rangers from the Department of Natural Resources, the Conservation Agents from the Department of Conservation, and other POST certified state agency investigators to exercise full state wide police authority as vested in Missouri peace officers pursuant to Chapter 590, RSMo during the period of this state declaration of emergency	April 3, 2006	31 MoReg 651
06-19	Allows the director of the Missouri Department of Natural Resources to grant waivers to help expedite storm recovery efforts	April 3, 2006	31 MoReg 652
06-20	Creates interim requirements for overdimension and overweight permits for commercial motor carriers engaged in storm recovery efforts	April 5, 2006	31 MoReg 765
06-21	Designates members of staff with supervisory authority over selected state agencies	June 2, 2006	31 MoReg 1055

Executive Orders	Subject Matter	Filed Date	Publication
06-22	Healthy Families Trust Fund	June 22, 2006	31 MoReg 1137
06-23	Establishes Interoperable Communication Committee	June 27, 2006	31 MoReg 1139
06-24	Establishes Missouri Abraham Lincoln Bicentennial Commission	July 3, 2006	31 MoReg 1209
06-25	Declares that a State of Emergency exists in the State of Missouri, directs that the Missouri State Emergency Operations Plan be activated	July 20, 2006	31 MoReg 1298
06-26	Directs the Adjutant General to call and order into active service such portions of the organized militia as he deems necessary to aid the executive officials of Missouri, to protect life and property, and to support civilian authorities	July 20, 2006	31 MoReg 1300
06-27	Allows the director of the Missouri Department of Natural Resources to grant waivers to help expedite storm recovery efforts	July 21, 2006	31 MoReg 1302
06-28	Authorizes Transportation Director to issue declaration of regional or local emergency with reference to motor carriers	July 22, 2006	31 MoReg 1304
06-29	Authorizes Transportation Director to temporarily suspend certain commercial motor vehicle regulations in response to emergencies	August 11, 2006	This Issue
06-30	Extends the declaration of emergency contained in Executive Order 06-25 and the terms of Executive Order 06-27 through September 22, 2006, for the purpose of continuing the cleanup efforts in the east central part of the State of Missouri	August 18, 2006	Next Issue

2005

05-01	Rescinds Executive Order 01-09	January 11, 2005	30 MoReg 261
05-02	Restricts new lease and purchase of vehicles, cellular phones, and office space by executive agencies	January 11, 2005	30 MoReg 262
05-03	Closes state's Washington D.C. office	January 11, 2005	30 MoReg 264
05-04	Authorizes Transportation Director to issue declaration of regional or local emergency with reference to motor carriers	January 11, 2005	30 MoReg 266
05-05	Establishes the 2005 Missouri State Government Review Commission	January 24, 2005	30 MoReg 359
05-06	Bans the use of video games by inmates in all state correctional facilities	January 24, 2005	30 MoReg 362
05-07	Consolidates the Office of Information Technology to the Office of Administration's Division of Information Services	January 26, 2005	30 MoReg 363
05-08	Consolidates the Division of Design and Construction to Division of Facilities Management, Design and Construction	February 2, 2005	30 MoReg 433
05-09	Transfers the Missouri Head Injury Advisory Council to the Department of Health and Senior Services	February 2, 2005	30 MoReg 435
05-10	Transfers and consolidates in-home care for elderly and disabled individuals from the Department of Elementary and Secondary Education and the Department of Social Services to the Department of Health and Senior Services	February 3, 2005	30 MoReg 437
05-11	Rescinds Executive Order 04-22 and orders the Department of Health and Senior Services and all Missouri health care providers and others that possess influenza vaccine adopt the Center for Disease Control and Prevention, Advisory Committee for Immunization Practices expanded priority group designations as soon as possible and update the designations as necessary	February 3, 2005	30 MoReg 439
05-12	Designates members of staff with supervisory authority over selected state agencies	March 8, 2005	30 MoReg 607
05-13	Establishes the Governor's Advisory Council for Plant Biotechnology	April 26, 2005	30 MoReg 1110
05-14	Establishes the Missouri School Bus Safety Task Force	May 17, 2005	30 MoReg 1299
05-15	Establishes the Missouri Task Force on Eminent Domain	June 28, 2005	30 MoReg 1610
05-16	Transfers all power, duties and functions of the State Board of Mediation to the Labor and Industrial Relations Commission of Missouri	July 1, 2005	30 MoReg 1612
05-17	Declares a DROUGHT ALERT for the counties of Bollinger, Butler, Cape Girardeau, Carter, Dunklin, Howell, Iron, Madison, Mississippi, New Madrid, Oregon, Pemiscot, Perry, Pike, Ralls, Reynolds, Ripley, Ste. Francois, Ste. Genevieve, Scott, Shannon, Stoddard and Wayne	July 5, 2005	30 MoReg 1693
05-18	Directs the Director of the Department of Insurance to adopt rules to protect consumer privacy while providing relevant information about insurance companies to the public	July 12, 2005	30 MoReg 1695
05-19	Creates the Insurance Advisory Panel to provide advice to the Director of Insurance	July 19, 2005	30 MoReg 1786
05-20	Establishes the Missouri Homeland Security Advisory Council. Creates the Division of Homeland Security within the Department of Public Safety. Rescinds Executive Orders 02-15 and 02-16	July 21, 2005	30 MoReg 1789
05-21	Creates and amends Meramec Regional Planning Commission to include Pulaski County	August 22, 2005	30 MoReg 2006

Executive Orders	Subject Matter	Filed Date	Publication
05-22	Establishes the State Retirement Consolidation Commission	August 26, 2005	30 MoReg 2008
05-23	Acknowledges regional state of emergency and temporarily waives regulatory requirements for vehicles engaged in interstate disaster relief	August 30, 2005	30 MoReg 2010
05-24	Implements the Emergency Mutual Assistance Compact (EMAC) with the state of Mississippi, directs SEMA to activate the EMAC plan, authorizes use of the Missouri National Guard	August 30, 2005	30 MoReg 2013
05-25	Implements the Emergency Mutual Assistance Compact (EMAC) with the state of Louisiana, directs SEMA to activate the EMAC plan, authorizes use of the Missouri National Guard	August 30, 2005	30 MoReg 2015
05-26	Declares a state of emergency in Missouri and suspends rules and regulations regarding licensing of healthcare providers while treating Hurricane Katrina evacuees	September 2, 2005	30 MoReg 2129
05-27	Directs all relevant state agencies to facilitate the temporary licensure of any healthcare providers accompanying and/or providing direct care to evacuees	September 2, 2005	30 MoReg 2131
05-28	Declares that a State of Emergency exists in the State of Missouri, directs that the Missouri State Emergency Operations Plan be activated, and authorizes the use of state agencies to provide support to the relocation of Hurricane Katrina disaster victims	September 4, 2005	30 MoReg 2133
05-29	Directs the Adjutant General call and order into active service such portions of the organized militia as he deems necessary to aid the executive officials of Missouri, to protect life and property, and to support civilian authorities	September 4, 2005	30 MoReg 2135
05-30	Governor Matt Blunt establishes the Office of Supplier and Workforce Diversity to replace the Office of Equal Opportunity. Declares policies and procedures for procuring goods and services and remedying discrimination against minority and women-owned business enterprises	September 8, 2005	30 MoReg 2137
05-31	Assigns the Missouri Community Service Commission to the Department of Economic Development	September 14, 2005	30 MoReg 2227
05-32	Grants leave to additional employees participating in disaster relief services	September 16, 2005	30 MoReg 2229
05-33	Directs the Department of Corrections to lead an interagency steering team for the Missouri Reentry Process (MRP)	September 21, 2005	30 MoReg 2231
05-34	Orders the Adjutant General to call into active service portions of the militia in response to the influx of Hurricane Rita victims	September 23, 2005	30 MoReg 2233
05-35	Declares a State of Emergency, directs the State Emergency Operations Plan be activated, and authorizes use of state agencies to provide support for the relocation of Hurricane Rita victims	September 23, 2005	30 MoReg 2235
05-36	Acknowledges regional state of emergency and temporarily waives regulatory requirements for commercial vehicles engaged in interstate disaster relief	September 23, 2005	30 MoReg 2237
05-37	Closes state offices on Friday, November 25, 2005	October 11, 2005	30 MoReg 2383
05-38	Implements the EMAC with the State of Florida in response to Hurricane Wilma	October 21, 2005	30 MoReg 2470
05-39	Acknowledges continuing regional state of emergency, temporarily limits regulatory requirements for commercial vehicles engaged in interstate disaster relief, and rescinds orders 05-23 and 05-36	October 25, 2005	30 MoReg 2472
05-40	Amends Executive Order 98-15 to increase the Missouri State Park Advisory Board from eight to nine members	October 26, 2005	30 MoReg 2475
05-41	Creates and establishes the Governor's Advisory Council for Veterans Affairs	November 14, 2005	30 MoReg 2552
05-42	Establishes the National Incident Management System (NIMS) as the standard for emergency incident management in the State of Missouri	November 14, 2005	30 MoReg 2554
05-43	Creates and establishes the Hispanic Business, Trade and Culture Commission and abolishes the Missouri Governor's Commission on Hispanic Affairs	November 30, 2005	31 MoReg 93
05-44	Declares a state of emergency and activates the Missouri State Emergency Operations Plan as a result of the failure of the dam at Taum Sauk Reservoir	December 14, 2005	31 MoReg 96
05-45	Directs the Adjutant General to activate the organized militia as needed as a result of the failure of the dam at Taum Sauk Reservoir	December 14, 2005	31 MoReg 97
05-46	Creates and establishes the Missouri Energy Task Force	December 27, 2005	31 MoReg 206
05-47	Directs that the issuance of overdimension and overweight permits by the Missouri Department of Transportation for commercial motor carriers engaged in cleanup efforts in Reynolds County resulting from the Taum Sauk Upper Reservoir failure shall be subject to interim application requirements	December 29, 2005	31 MoReg 279

The rule number and the MoReg publication date follow each entry to this index.

ACCOUNTANCY, STATE BOARD OF

compensation; 4 CSR 10-1.020; 5/1/06
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For *Code of State Regulations* Subscribers

The September 30 update of the *Code of State Regulations* is going to be unusually large. This update will include new rule numbers associated with 4 CSR 50, 4 CSR 100, 4 CSR 105 and 4 CSR 140 and the divisions included in Professional Registration, which moved from the Department of Economic Development to the Department of Insurance, Financial Institutions and Professional Registration.

To accommodate the rule number change, all volumes of *Code* will require new volume stickers. Volumes 2 and 3 will be consolidated into one volume (volume 2) and current volume 3 will be reused to expand volume 13 and reduce the overcrowding of that volume. A complete set of *Code* will now be 15 volumes. The additional binder and Volume stickers to renumber volumes will be mailed with the September 30 Code update.

Office of the Secretary of State

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9/15/06

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